

## DEPARTMENT OF COMMUNITY SERVICES

DIVISION OF ENVIRONMENTAL HEALTH 292 West Beamer Street, Woodland, Ca 95695

Telephone: 530-666-8646 • Fax 530-669-1448
Environmental.health@yolocounty.org

FOR OFFICE USE ONLY: FA #: S	SR #:
------------------------------	-------

## APPLICATION FOR SEPTIC SYSTEM DESIGN VARIANCE

APPLICANT: Name:	Phone:	email:
Mailing address:		
OWNER: Name:	Phone:	email:
Mailing address:		
CONTRACTOR: Name:	Phone:	email:
Mailing address:		
PROPERTY: Assessor Parcel Number (APN):		
Address:		

## **SYSTEM DESIGN:**

Please attach a design for the proposed septic system. Include lot size, all existing structures, wells, proposed setbacks and limiting factors (i.e. slopes, high groundwater, wetlands, trees, and vegetation etc.)

Variance(s)Requested:	Applicable County Code:	Reason(s) for Variance:	Alternatives if Variance is Denied: (No variance shall be granted where there is an alternative that meets adopted standards)

## The Variance (s) Process:

On a case by case basis, the Director of Environmental Health may grant a variance to certain provisions of the Yolo County Code. Such requests shall be made in writing by the applicant and include an appropriate fee. No variance will be granted that constitutes a grant of a special privilege inconsistent with limitations placed upon other properties in the same or similar circumstances.

The applicant must provide written evidence that ALL eight (8) of the following criteria for granting the variance(s) are being met. The detailed statements answering each of the following criteria shall be attached to this application.

(1) The variance would not present a public health hazard, have an ad pollution or degradation of ground water or surface water.	lverse environmental effect, or result in			
(2) Special circumstance(s) exist(s) for the subject property and for w requirements of County Code create(s) an undue hardship.	which strict application of the			
(3) The hardship is due to unique conditions affecting the property.				
(4) The hardship was not intentionally caused by the action of the app	plicant.			
(5) The requested variance will not have an adverse effect on the surrounding properties.				
(6) The requested variance will not confer on the applicant any special privilege that is denied to other property owners with similar circumstance.				
(7) The strict interpretation of the provisions of the County Code wou commonly enjoyed by other properties in the same or similar circumstance.				
(8) The requested variance is the minimum variance which would alle	eviate the hardship.			
I certify that the above information and the attached information to file an application for a Variance Request to a Septic System D behalf of the owner.				
Applicant Signature/Title	Date			
Property Owner Signature	Date			
Office Use Only:  • REHS Findings/Remarks:				
Reviewed by:, REH	IS Date:			
• EH Supervisor Findings/Recommendation:				
Reviewed by:	Date:			
• Director of Environmental Health Findings/Recommendation:	:			
☐ Variance Granted with the following conditions:				
☐ Variance Denied for the following reason(s):				