



System Design Form for Standard Gravity System

To be submitted with System Design, Septic System Installation Permit Application and the proper permit fee.

I. Parcel Identification

APN:	FA:
Site Address:	
Applicant name:	Designer name:
Applicant mailing address:	Designer mailing address:
Applicant phone number/email:	Designer phone number/email:

II. Design Parameter

Dispersal type: <input type="checkbox"/> Drainrock <input type="checkbox"/> Chamber <input type="checkbox"/> Other: _____	
Number of bedroom:	Dispersal field square footage:
Daily flow (gpd)*:	Trench width (inches):
Septic tank capacity (gal):	Total lineal trench length (ft):
Application rate (gpd/ft ²):	Trench depth (inches)
Design vertical separation (inches):	Depth of fill over drainrock (if applicable) (inches):
Ground slope in drain field (%):	Curtain drain depth (if applicable) (ft):
*If a commercial facility, attach a page of wastewater daily flow calculations	

III. Certification of Design

The undersigned Designer or Installer (circle one) has submitted this system design based on the site evaluation report and the drawings attached hereto, and has determined it to be in compliance with the county code.	
System Designer or Installer	Date

Caution: This design is only valid when all the following conditions are met:

- ✓ The plans are stamped "Approved" by Yolo County Environmental Health
- ✓ The septic system installation permit has been issued and has not expired. The permit expiration date is 1 year from the date of issuance
- ✓ The system is installed by a qualified installer or homeowner authorized by Yolo County Environmental Health
- ✓ Disposal field site conditions have not been altered to adversely affect conditions of design approval.

SEPTIC SYSTEM DESIGN CHECKLIST

This Checklist shall be completed and signed by system designer or installer

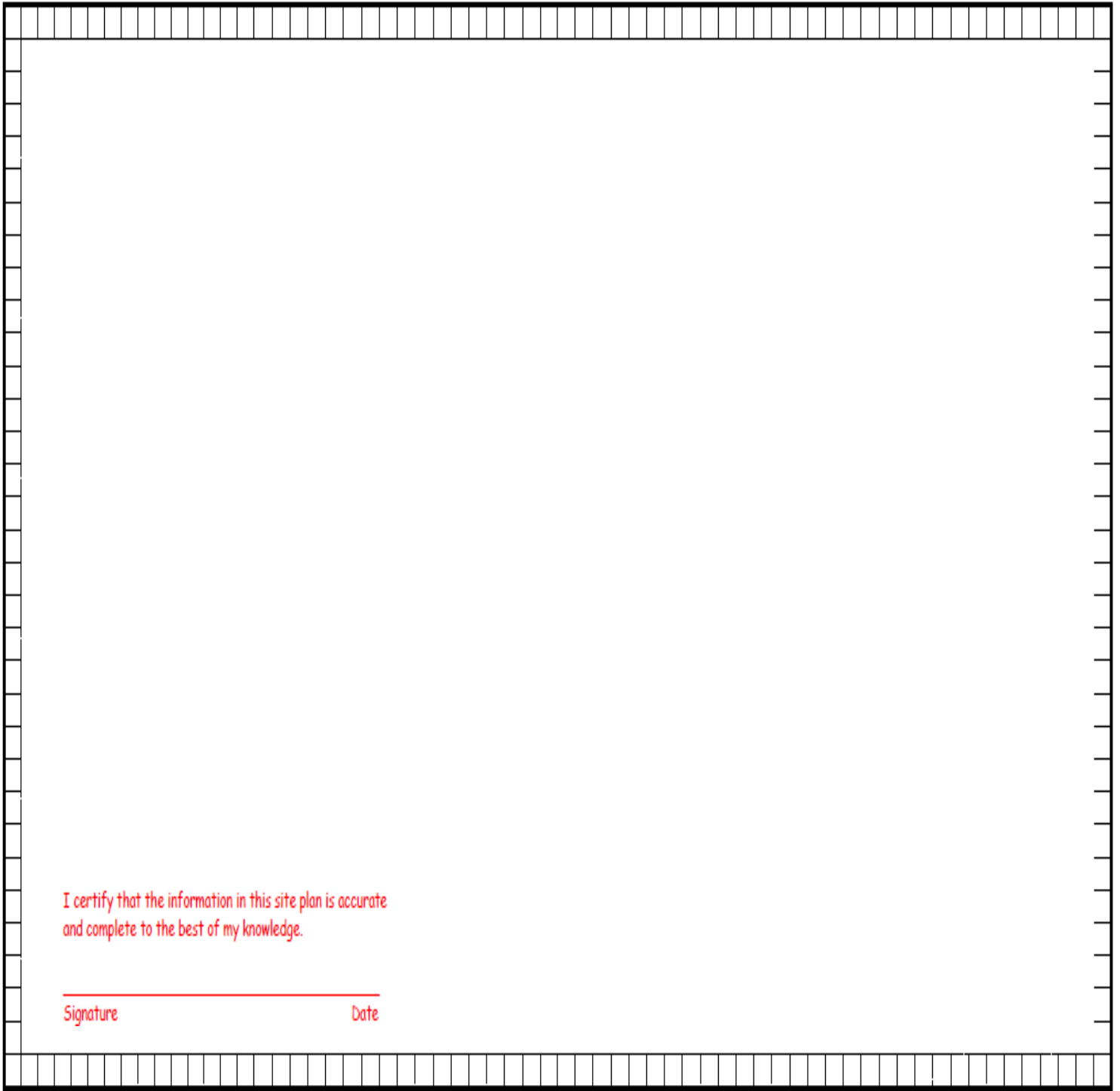
- Owner's name
- Assessor's Parcel Number
- North arrow
- Property lines
- Any relevant site features such as cliffs, cut banks, irrigation canals, springs, rock outcrop, landslide areas, drainage ways, etc. within 200 ft of the primary and repair dispersal areas
- Any existing and/or proposed site improvements, such as buildings, pools, driveways, parking areas, easements, waterlines, etc. (please specify whether existing or proposed)
- Existing wastewater dispersal areas, if present
- Location and dimensions of designated primary and repair wastewater dispersal areas
- Test hole locations from Site Evaluation
- Existing and proposed wells within 200 ft of the primary and repair dispersal areas and neighboring wells within 100 ft of property lines
- Location and orientation of curtain drain
- Direction of slope in primary and repair dispersal areas
- Dispersal field orientation and layout
- Trench/bed dimensions and critical distances within layout
- D-Box/"T"/"L" locations
- Septic tank/pump chamber location
- Observation port location
- Scale of drawing shown on scale bar
- Cross Section Drawings:
 - Dispersal trench
 - Observation port
 - Capping fill, if applicable
 - Curtain drain, if applicable
- Building pad
- Invasive trees or bushes
- System dispersal field and replacement area are staked and taped on property

Note: Designer may use form attached for design drawing or may attached drawing on separate page, provided the elements identified in this checklist are included.

System Designer or Installer (circle one)

Date

SITE PLAN Assessor's Parcel Number: - - Permit #: _____



I certify that the information in this site plan is accurate
and complete to the best of my knowledge.

Signature

Date

Attach additional sheets as needed.

Owner Name: _____ Scale 1" = _____

Address / Phone: _____

Site Location: _____

Contact Name: _____ Phone: _____