

Jackson County Environmental Health

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REQUEST FOR SERVICE

Existing Septic System Evaluation

_____ **Residential Evaluation Fee \$125.00** Please attach plans/sketch for additions and pools
(Priority \$200.00) (i.e. location of proposed pool and decking; footprint addition to house, etc.)

_____ **Commercial Evaluation Fee \$250.00** Please attach plans/sketch for additions
(Priority \$400.00)

Water Sample

_____ **Official Test Fee \$150.00** Sample collected by health department and official letter provided

_____ **Self Test Fee \$75.00** Bottle provided by health department and applicant collects sample; no written results provided

Owner Name _____ Phone # _____

Applicant Name _____ Phone # _____

Applicant Email _____

Property Address _____ City: _____ Zip: _____

Subdivision Name _____ Lot/Block: _____

Requesting Agency (i.e. mortgage company, DFCS, etc.) _____

Is there a locked fence or gate? (Y/N) _____ (If yes, please provide access instructions) Dogs present? (Y/N) _____

Current # of bedrooms: _____ Garbage Disposal (Y/N) _____ Lot Size _____ (Acres) Water (circle one) *Public* *Well*

Changing footprint of the house? (Y/N) _____ Dimensions of Addition _____ Date to be staked out: _____

Reason for Request (check one and complete required information):

___ Adoption/ Foster Care (circle one): *Private* *State*

___ Loan closing (circle one): *Purchase* *Refinance* *Sale* *Other:* _____

___ Bedroom Addition: *Total number of bedrooms after addition:* _____

___ Pool Addition

___ Other Addition: *Type of Addition:* _____

___ Relocating Mobile Home

___ Other: _____

Please attach plans/sketch for additions/modifications. Failure to provide adequate plans can result in a delay for your request. Requests that require modifications to the septic system will result in additional fees and may require a level 3 soil report and/or site plan. Additions to the footprint of existing structures or addition of pools or other structures to the lot must be staked out prior to evaluation. If requesting to tie into an existing system that is not on record, a pump out receipt and pumper inspection report is required.

-----DEPARTMENT USE ONLY-----

AMOUNT PAID _____ RECEIVED BY _____ DATE _____