Individual Onsite Wastewater Treatment Facility
Site Suitability Determination Checklist, Guidelines

Pima County Department of Environmental Quality
33 N Stone Ave., Suite 700
Tucson, AZ 85701
Tel: (520) 724-7400

This form must be filled in completely and signed by the applicant, the applicant's representative who has legal authority to sign for the applicant, or a qualified individual who completed the Site Suitability Determination. Submit original forms, as photocopies will not be accepted.

Site Address / Legal Description: 4300 W POTVIN LN Date: 7/8/21

Subdivision: N/A Lot # / Space: _____ Tax ID Number: 224-15-0190

Owners Name: JAMES & JENNIFER DESHAZO Owners Phone Number: _____

Person/Company Name Performing Site Evaluation: GABRIEL VELASCO Phone #: (520) 437-5039

Contractor Name & License #, if applicable: _____

A. Site Plan Information

Does the site plan contain the following information in the format required?

(Check the items listed below that apply)

X 1. Parcel number (Tax ID #), property address, and property size in acres. **A.309.B.2.a**
X 2. Property boundaries and north arrow. **A.309.B.2.b**
X 3. Proposed and existing on-site wastewater treatment facilities, with wastewater pipelines. **A.309.B.2.b.i**
X 4. Dwellings and other buildings, pools, wells, and ponds. **A.309.B.2.b.i**
X 5. Driveways, porches, tennis courts, and other paved or concrete features. **A.309.B.2.b.i**
X 6. Cut banks, retaining walls, or other features that might affect the system. **A.309.B.2.b.i**
X 7. Features less than 200 feet outside property line that constrain location. **A309.B.2.b.ii**
X 8. Topography with contours, original grades, and final grades if surface slope is greater than 5%. **A309.B.2.b.iii**
X 9. Surface limiting conditions, such as the presence of fill material or the 100-year floodplain. **A311.C, A310.C.2**
X 10. Primary area, reserve area, and all soil testing locations. **A309.B.2.b.iv**
X 11. Site plan is drawn to scale. **A.309.B.2.b**
X 12. Site plan is accurate, as determined by a field inspection. **A.301.D**
X 13. No public sewer with adequate capacity is within 200 feet of property line, or waiver was obtained. **PCC 7.21.037.D**

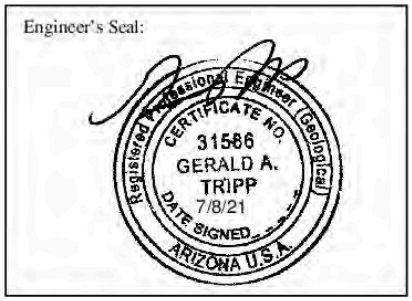
B. Setback Requirements

Does the proposed location for <u>all parts</u> of the on-site system meet the following setback requirements? **A312.C applies to all**

(Check the items listed below that apply)

X 1. Five feet or more from a driveway or easement.
X 2. Ten feet (water main), five feet (domestic line).
X 3. Ten feet or more to structures including decks, porches, etc.
X 4. Five feet or more to a swimming pool.
X 5. Fifty feet to a wash that drains more than 20 acres.
X 6. One hundred feet or more to a well. **notes (2)a,b**
X 7. Five feet or more from property lines.
X 8. Fifty feet from property line if no central water source.
X 9. One hundred feet to live or intermittent stream.
X 10. Two hundred feet to surface water drinking source.
X 11. One hundred feet to lake, reservoir, or canal.
X 12. One hundred feet to an earth fissure.
X 13. Downslopes or cut banks >15%, culverts, and ditches from: septic tank- 10 feet, disposal field if no limiting condition within 12 feet of land surface- 20 feet (50 feet if limiting condition exists).

Engineer's Seal:



C. Site Requirements

If soil evaluation method other than percolation test is submitted, then A310.E (ASTM) applies !

(Check the items listed below that apply)

X___ 1. Minimum of 2 soil test sites (perc or ASTM) in primary area, 1 in reserve area, and others as necessary. **A310.E.1, F.1**

X___ 2. Soil test holes have a minimum depth of 12 feet and meet Minimum Vertical Separation (MVS) requirements. **A312.E**
(4 feet below trench bottom if surfacing of wastewater is the concen, regardless of Soil Absorption Rate [SAR])
(5 feet below trench bottom for seasonal high water table; SAR 0.20-0.63 for trench/chamber, 0.13-0.42 for beds)
(10 feet below trench bottom for seasonal high water table; SAR 0.63-1.20 for trench/chamber, 0.42-0.93 for beds)

n/a___ 3. Perc tests performed at multiple depths, or soil evaluation shows that perc test at one depth is sufficient. **A310.F.1.b**

n/a___ 4. Perc test holes were properly prepared. **A310.F.1.c,d,e,f**

n/a___ 5. The perc test holes were properly pre-soaked before testing. **A310.F.2.a,b,c,d**
a. If 12" of water drains from holes in less than 60 minutes, three consecutive times, then OK to perc.
b. If 12" takes longer than 59 min., keep at least 9" in hole for 4 hours, then wait 16-24 hours, then OK to perc.

n/a___ 6. Perc tests were properly conducted: fill to 6", time 1" drop, refill, continue until 3 tests are within 10%. **A310.F.3**

n/a___ 7. Soil evaluation for perc test is complete: need soil texture, structure, consistence, and % rock fragments. **A310.F.3.f**

n/a___ 8. Perc test results for each hole tested are between 1 and 120 minutes, or ASTM provided. **A310.D.3.b.vi**

X___ 9. ASTM is provided if a subsurface limiting condition exists at less than 12 feet below land surface. **A310.D.2, D.3.b**

X___ 10. Natural surface slope is less than 15% in primary and reserve areas, or ASTM provided. **A310.D.3.b.i**

X___ 11. The soil evaluation holes contain less than 35% rock fragments in all soil horizons, or ASTM provided. **A310.D.3.b.iii**

X___ 12. Soil evaluation holes are dry, with no evidence of groundwater or soil mottling, or ASTM provided. **A310.D.3.b.iv & v**

D. Design Requirements

(Check the items listed below that apply)

X___ 1. The design flow is accurately described using the A314.A.4 Table and the Unit Daily Design Flows Table, and the deisgn flow includes all sewage sources and characteristics. **A309.B.3, A312.B.3, A314.A.4.a**

X___ 2. All setbacks have been met after system location has been determined, or A312.G request submitted. **A312.C & notes**

X___ 3. The correct soil absorption rate (SAR) has been calculated using the most conservative result of all testing regardless of method, or additional justification provided. **A312.D.1**

X___ 4. Minimum Vertical Separation (MVS) requirements have been met from subsurface limiting conditions. **A312.E.1, E.3.c**

X___ 5. All SURFACE limiting conditions have been disclosed and addressed. **A311.C, A310.C.2, A312.G**

X___ 6. The reserve area is equal in size to the primary area and cannot be divided, constructed on, or improved. **A312.D.4**

X___ 7. The septic tank is sized according to the A314.A.4 Table, or 2.1 times the design flow if not an SFR. **A314.A.4.a & b**

X___ 8. A list of materials for constructing the system has been provided. **A309.B.4**

X___ 9. The AGGREGATE TRENCH or CHAMBER leach lines have been properly designed. **E302.C.1, C.2, C.4**

a. Trenches parallel contours, pipes/chambers are level, bottoms of trenches are level
b. Minimum backfill over pipes/chambers is 9", maximum is 24" unless SDR 35 used or chamber specs allow
c. Trenches are not paved over, and A312.G request is submitted if any other part of system will be paved over
d. Spacing of trench sidewalls is 2 times the depth of gravel below pipe or 5 feet, whichever is greater
e. Maximum trench length is 100 feet
f. Aggregate trench only:
1. Sidewall area included in design calculations (any sidewall between 12" and 48" below pipes)
2. Bottom area included in design calculations (between 12" and 36" wide), unless crushed concrete used
3. Maximum absorption area is 11 square feet per linear foot
4. 2" aggregate cover over pipes and geotextile fabric specified
g. Chambers only:
1. Absorption area per chamber determined by: A=(1.8 x B x L) + (2 x V x L)
2. Sidewall of chamber provides at least 35% open area, and no geotextile fabric used

NOTE: Each listed item should be checked (√), at the time it is reviewed by the applicant, for conformance to the proposed site. Space is provided on the reverse side of the checklist pages for making specific comments regarding the listed items. If specific comments about an item will be made, please mark that item above with an arrow (→) rather than a check mark (√).

Engineer's Seal

I certify by signing below that, to the best of my knowledge, the above information is accurate and true.

Digitally signed by Gerry Tripp
DN: cn=Gerry Tripp, o, ou, email=brazosgeo@yahoo.com, c=US
Date: 2018.08.14 09:03:29 -07'00'

Date: 7/8/21

Signature of Owner or Owners Representative