



256 Williamstown Rd.
 Ottawa, OH 45875
 Phone: 419-523-5608
 Fax: 567-538-5076
 Email: pchd@putnamhealth.com
 Website: www.putnamhealth.com



Lot Split Request with existing dwelling INSTRUCTIONS

- Please read the information below.
 - The following information is needed before the Putnam County Health Department is able to approve the lot split request.
1. **A completed lot split request form along with \$100.00 This form must be signed.**
 2. **A scaled site drawing (along with the lot split request form).**
 Submit a detailed drawing of the property. Include the acreage of the proposed lot existing physical structures, underground utilities, topographic features, ponds, existing sewage treatment system (STS), proposed replacement location for the STS, well or water source, water bodies, easements, utilities, proposed property lines, driveway, drainage lines, site conditions including vegetation, and drainage features and any other information necessary. Isolation distances for replacement STS shall be no less than:
 - 10 (ten) feet** from utility service line, roadway, road surface, driveway, or other hardscapes, property line or right-of-way boundary, properly sealed well, any building or other structure, areas with recorded easements, intermittent streams, swales, geothermal horizontal closed loop systems, irrigation lines and gray water recycling systems.
 - 50 (fifty) feet** from any surface water impoundment, lake, river, wetland, perennial stream and road cut-banks, water supply source (well, pond, etc.), and vertical open and closed loop geothermal heating and/or cooling system.
 3. **Stake or mark locations of the proposed lot corners/property lines on site.**
 4. **A soil evaluation must be completed in accordance with Ohio Administrative Code (OAC) 3701-29. (this will be submitted after the lot split request form)**
 A qualified site and soil evaluator must conduct an evaluation of the site to provide the information necessary to determine the type and size of the system that will be adequate to treat the household sewage on the property. The Putnam County Health Department does not perform soil evaluations.

The following soil scientists have indicated that they are willing to work in Putnam County:

Steven A. Miller, Soil Scientist
 1974 North Three B's and K Road
 Sunbury, OH 43074
 Phone: 614-579-1164
 Email: soilconsultant@gmail.com

Frank Gibbs, CPSS, CPSC, PWS & CCA
 PO Box 346
 Rawson, OH 45881
 Phone: 419-963-2542
 Email: fegibbs21@gmail.com

Additional soil scientists are listed at the following websites but have not indicated that they would be willing to work in Putnam County:

Soil Science Society of America
<https://www.soils.org/cerifications/professional-search>

Association of Ohio Pedologists
<http://www.ohiopedologist.com/consultant-list.html>

3. **Contact the Health Department with the scheduled time for the soil evaluation.**
4. **It is recommended that a permanent, recorded, legal easement or a recorded property deed be done if any portion of the STS including an outlet is not sited on the new lot. If an easement is not obtainable for the existing outlet, there should be an alternative outlet point identified and protected.**
5. **Provide plat to be signed by Health Department Environmental Health Staff.**



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LOT SPLIT with existing dwelling REQUEST

Address of the Property _____

Location of Property (if no address) _____

Person or Agency requesting lot split _____

Address _____

Phone _____ Email _____

Seller of the lot _____

Address _____

Purchaser of the lot _____

Address _____

Number of bedrooms in existing dwelling? 1 2 3 4 5 6

Is there a dwelling currently on the property? Yes No

Is a drawing of property provided which includes information from #2 of the instructions? Yes No

Is an easement or recorded property deed needed? Yes No

If so, is a copy included? Yes No

Properties with an existing dwelling will require an inspection from the Putnam County Health Department to verify that the STS and water source is not causing a nuisance and that there is adequate space for a replacement STS.

Additionally, during the inspection the replacement area will be verified and documented. The replacement area must meet the requirements of OAC 3701-29.

Only plats meeting the requirements in OAC 3701-29 will be approved by the Putnam County Health Department's Environmental Health staff.

Signature of Requestor _____ Date _____

***Signature required. Applications will NOT be processed until payment is received.**

OFFICE USE

Date Request Received _____ Receipt # _____ Date of Inspection _____

Date Soil Eval Received _____ Date Plat Received _____ Date Lot Split Signed _____