



# South Central Public Health District

Prevent. Promote. Protect.

## LAND DEVELOPMENT APPLICATION

Bellevue Office  
117 E. Ash Street  
Bellevue, ID 83313  
788-4335

Burley Office  
2311 Parke Ave. Unit 4, Ste. 4  
Burley, ID 83318  
678-8221

Gooding Office  
255 North Canyon  
Gooding, ID 83330  
934-4477

Jerome Office  
951 E Ave. H  
Jerome, ID 83338  
324-8838

Rupert Office  
1218 9th St, Ste. 15  
Rupert, ID 83350  
436-7185

Twin Falls Office  
1020 Washington St. N.  
Twin Falls, ID 83301  
737-5900

All fees are non-refundable

Subdivision

Municipal/Conveyance Plat

<b>Program: 726</b>	<b>Sub Program:</b>	<input type="checkbox"/> 241 – Residential	<input type="checkbox"/> 242 – Non-residential
TOTAL FEE:	RECEIPT #	DATE:	
PROPOSAL FEE:	RECEIPT #	DATE:	
BALANCE DUE (total minus proposal fee):	RECEIPT #	DATE:	

NAME OF SUBDIVISION: \_\_\_\_\_ SUBDIVISION # \_\_\_\_\_

PROPERTY LOCATION: Township \_\_\_\_\_ Range \_\_\_\_\_ Section \_\_\_\_\_ Quarter Section \_\_\_\_\_

GRID LOCATION: \_\_\_\_\_ PARCEL # \_\_\_\_\_ RP \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Name of Applicant: \_\_\_\_\_ Phone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Engineering Firm Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Engineer Name: \_\_\_\_\_ License # \_\_\_\_\_

Surveyor Name: \_\_\_\_\_ Phone: \_\_\_\_\_ License # \_\_\_\_\_

**Type of Plat:**  Residential  Commercial  Industrial

**Location:**  City \_\_\_\_\_  County \_\_\_\_\_  City Impact \_\_\_\_\_

**Total Acres:** \_\_\_\_\_ Proposed # of Lots: \_\_\_\_\_ Final # of lots \_\_\_\_\_

**Sewage Disposal:**  Private  Community  Municipal

**Water:**  Private  Community  Municipal

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\*\*\*FOR OFFICIAL USE ONLY\*\*\*

**SANITARY RESTRICTIONS:** ARE IN FORCE:  HAVE BEEN SATISFIED

Approved by: \_\_\_\_\_ Date: \_\_\_\_\_

EHS Signature

**Municipal sewage disposal systems requirements, as per Idaho Code 39-119; Title 50, Chapter 13:**

1. Submit the completed Land Development Application (page 1)
2. Provide an engineering approval letter from DEQ if required
3. Provide a “Will Serve” letter from the municipality
4. Provide a Mylar plat with the appropriate DEQ Health Certificate on the face of it
5. Provide an 8.5” x 11” or 11” x 17” hard copy of the plat for the SCPHD files

This Health Certificate is to be used for subdivisions with community and municipal water and sewer systems to satisfy sanitary restrictions.

**HEALTH CERTIFICATE**

Sanitary restrictions as required by Idaho Code, Title 50, Chapter 13 have been satisfied based on the DEQ approval of the design plans and specifications and the conditions imposed on the developer for continued satisfaction of the sanitary restrictions. Buyer is cautioned that at the time of this approval, no drinking water or sewer/septic facilities were constructed. Building construction can be allowed with appropriate building permits if drinking water or sewer facilities have since been constructed or if the developer is simultaneously constructing those facilities. If the developer fails to construct facilities or meet the other conditions of DEQ, then sanitary restrictions may be reimposed, in accordance with Section 50-1326, Idaho Code, by the issuance of a certificate of disapproval, and no construction of any building or shelter requiring drinking water or sewer/septic facilities shall be allowed.

\_\_\_\_\_  
REHS, South Central Public Health District

\_\_\_\_\_  
Date



**Instructions for subdivisions with subsurface sewage disposal systems that applies to all counties within South Central Public Health District:** It is the land developer's responsibility to furnish SCPHD with the necessary information to satisfy the intent of Idaho Code Title 50 Chapter 13 for the removal of sanitary restrictions.

The application and reports are to be completed and certified by an Idaho licensed professional engineer. Final plats are to be prepared by an Idaho licensed professional land surveyor.

Failure to complete all information as requested, or if in the opinion of SCPHD any aspect of the proposed development has the potential to cause increased risk to public health or degradation of the environment shall be cause for SCPHD to deny the removal of sanitary restrictions.

### **Steps for developing Property:**

**1. Schedule a meeting with the SCPHD Registered Environmental Health Specialist (REHS) to present your proposal. \***

#### **Proposal meeting requirements:**

Please bring the following to the meeting:

- The completed application form (page 1) along with a minimum of \$30.00 per lot proposal review fee. The balance of \$90 per lot will be required at the time the preliminary plat and the completed land development report is submitted to SCPHD. (item 5 below)
- A map showing the proposed subdivision
- An aerial or satellite map of the proposed subdivision with at least a ¼ mile area around the subdivision boundaries. (This is to find suitable locations for water samples near the proposed subdivision)

At the meeting the REHS will help you determine the following:

- Number and location of test holes needed on the property
- Direction of groundwater flow in the area of the proposal
- Number and location of required water samples in the area of the subdivision
- Other items as needed or requested

**\*Note: Also contact the county or city jurisdiction where the proposed subdivision is located and begin working on their requirements simultaneously with these requirements.**

**2. Dig test holes and schedule test hole inspections with the REHS.** The test hole log is to be submitted to the SCPHD REHS.

**3. Take water samples.** Water samples are to be taken by the engineers, submitted to a Laboratory certified by the State of Idaho, and nitrate results reported to the SCPHD REHS.

**4. Preliminary review by the SCPHD REHS.** After reviewing the test hole logs, the water sample results and the preliminary plat the REHS will determine whether a Nutrient Pathogen Study is needed, the minimum type of septic systems required, minimum lot sizes required, and if more water samples or test holes will be needed.

**5. Prepare and turn in a completed Land Development Report with a Preliminary plat to SCPHD** and pay the balance of the fees. *This information should be attached together in a report form in the order shown below. A CD may also be submitted with the report.*

**6. After reviewing the completed Land Development Report the SCPHD REHS** will send an approval letter to the developer if the report and preliminary plat meet all requirements. A copy will be



sent to the City or County Planning and Zoning administrator. (Some Cities and Counties are requiring this letter before they will schedule the public hearing.)

**The applicant must submit the following in the Land Development Report:**

1. **Application form and fees** – Completely fill out the application form and submit with fees.
2. **Preliminary Plat and an informational plat map** showing all items as requested on the attached check list (page 6). The preliminary plat and the informational plat map must be no less than 18 inches by 27 inches (size required by Idaho code section 50-1304 for “plats offered for record”). After approval of the subdivision please submit a copy of the final signed and recorded plat.
3. **Test hole log, with soil profiles and descriptions**

Subdivision Name:

Date:

Test hole #	Depth log and soil type	Proposed septic system type	GPS location, If required by the REHS
1			
2			
3			

- Generally test holes should be dug to a maximum of 8 feet deep, or until a limiting layer is encountered. Sand may require 10 foot test holes, check with the REHS.
  - Log the soil depth, profile, and soil texture for each hole
  - **Mark the test hole locations on the informational plat map. Log in the proposed septic system type based on soil depth and type (use the Idaho TGM for help and SCPHD’s Nutrient Pathogen Studies, Policy .885). If required by the SCPHD REHS log the GPS location of each test hole**
  - Document the soil type by using NRCS maps and/or texturing. If soil type variation from the NRCS maps is encountered then texturing some soil samples is required.
  - Please notify us when holes are to be dug to schedule a site visit. We will let you know at the time of the site visit if additional test holes are needed
4. **NRCS soil maps and soil descriptions of the property** – Please include a copy of the NRCS Soil maps and Soil descriptions of the area in your report. This information can be found on the web. See resources from the web last page of document.
  5. **Map of groundwater directional flow and location of wells that are approved for the water samples** – SCPHD policy .885 now requires water tests for nitrates in the surrounding area of all proposed subdivisions with five or more lots.
    - The policy requires four or more samples from wells as close as possible to the development. If possible obtain two or more samples up gradient and two or more samples down gradient of the subdivision in the directional flow of the aquifer
    - **Prior to sampling** the water sample locations are to be pre-approved by the SCPHD REHS
    - Water samples are to be taken by the consulting engineering firm, not the property developer
    - Water samples are used to help determine if a nutrient pathogen study will be required for the subdivision. See Nutrient Pathogen Policy .885 on SCPHD website\* (see page 10)
    - Include in the report a copy of a satellite or topographical map of the subdivision area with an arrow showing ground water directional flow. Mark the location of the wells where nitrate water samples were taken



- DEQ has prepared potentiometric maps of some of the areas in our district showing direction of ground water flow. Please contact our office or DEQ to obtain copies of the maps
- If it is determined that a Nutrient Pathogen Study is required, it can be turned in separate from this report. The final approval letter for the subdivision cannot be written until after the results of the Nutrient Pathogen Study and DEQ’s comment letter have been received

**6. Water sample results for nitrates** – Water sample results for nitrate are to be entered into a table (shown below) that is to be attached to the water directional flow map. Include copies of the **laboratory reports** of the Nitrate tests for the water samples with the **chain of custody forms** from the lab for each sample. Please include the GPS location of each water sample.

**Date of samples:** (Use WGS 84 datum or specify what datum was used.)

Well tag number	Address of well	GPS location: Latitude (N) DD.ddd Longitude (W) DD.ddd		Nitrate results (ppm)

Please attach this table to the map showing the approved water sample locations

- 7. Nutrient pathogen study.** If it is determined that this is needed.
- 8. Correspondence** – Any correspondence from agencies or individuals that pertain to this subdivision application.
- 9. Checklist** – Page 6
- 10. Other** – any other information that may be needed as determined on a case by case basis.



**Subdivision Name** \_\_\_\_\_ **Date** \_\_\_\_\_

**Checklist** – This checklist serves as a guide for the items needed for approval. As items are included in the report, check them on this list. If an item does not apply check the NA box and include a short note as to why it does not apply in your report referencing the number on the checklist.

#	Item	YES	NA	SCPHD use
1	<b>Application</b> - Complete	<input type="checkbox"/>	<input type="checkbox"/>	
2	<b>Fees enclosed</b>	<input type="checkbox"/>	<input type="checkbox"/>	
	<b>Informational Plat Map</b>			
4	Topographic - showing 5 ft. contours	<input type="checkbox"/>	<input type="checkbox"/>	
5	<b>1 acre-minimum sized lots</b>	<input type="checkbox"/>	<input type="checkbox"/>	
6	1.5 acre lots for evapotranspiration systems	<input type="checkbox"/>	<input type="checkbox"/>	
7	Proposed lot lines shown	<input type="checkbox"/>	<input type="checkbox"/>	
8	All easements and proposed encroachments shown	<input type="checkbox"/>	<input type="checkbox"/>	
9	Show location on the plat of any underground pipelines or utilities	<input type="checkbox"/>	<input type="checkbox"/>	
10	Drainage or run-off areas, or problem drainage areas	<input type="checkbox"/>	<input type="checkbox"/>	
11	Location of wells and septic systems marked on map if required by REHS	<input type="checkbox"/>	<input type="checkbox"/>	
12	Existing wells within 100 feet of the development shown	<input type="checkbox"/>	<input type="checkbox"/>	
13	Existing drainfields within 100 feet of the development shown	<input type="checkbox"/>	<input type="checkbox"/>	
14	Surface water, streams lakes , ponds, within 300 ft. of development shown	<input type="checkbox"/>	<input type="checkbox"/>	
15	Ditches and canals within 50ft. of development shown	<input type="checkbox"/>	<input type="checkbox"/>	
16	Spring discharges shown	<input type="checkbox"/>	<input type="checkbox"/>	
17	Show locations of any injection wells, underground seepage tunnels, tiles, or similar features on the property. (Check with ID Dept of Water Resources and Canal Companies)	<input type="checkbox"/>	<input type="checkbox"/>	
18	100 year flood plain shown	<input type="checkbox"/>	<input type="checkbox"/>	
19	State whether or not wet areas have been designated as wetlands by the Army Corps of Engineers or a consultant that is approved to designate wetlands. Show wetlands on the informational plat map	<input type="checkbox"/>	<input type="checkbox"/>	
20	Rock outcrops shown	<input type="checkbox"/>	<input type="checkbox"/>	
21	Areas exceeding 20% slope color coded	<input type="checkbox"/>	<input type="checkbox"/>	
22	Street addresses on lots	<input type="checkbox"/>	<input type="checkbox"/>	
23	Copy of final recorded Mylar plat	<input type="checkbox"/>	<input type="checkbox"/>	
	<b>Test Holes</b>			
24	Depth logs and soil profiles	<input type="checkbox"/>	<input type="checkbox"/>	
25	Soil types recorded	<input type="checkbox"/>	<input type="checkbox"/>	
26	Test hole locations shown on informational plat map	<input type="checkbox"/>	<input type="checkbox"/>	
27	NRCS soil map included	<input type="checkbox"/>	<input type="checkbox"/>	
28	NRCS soil descriptions included	<input type="checkbox"/>	<input type="checkbox"/>	
29	Determine the level and duration of the normal high ground water.	<input type="checkbox"/>	<input type="checkbox"/>	
30	State the soils maximum application rate as per TGM	<input type="checkbox"/>	<input type="checkbox"/>	
	<b>Subsurface Sewage Disposal Systems (individual)</b>			
31	Type of systems proposed for each lot	<input type="checkbox"/>	<input type="checkbox"/>	
32	Adequate approved area for primary and replacement systems	<input type="checkbox"/>	<input type="checkbox"/>	



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	<b>Level 1 Nutrient Pathogen Study</b> (as required per policy .885)			
33	Nutrient pathogen study report enclosed	<input type="checkbox"/>	<input type="checkbox"/>	
34	DEQ comment letter enclosed	<input type="checkbox"/>	<input type="checkbox"/>	
	<b>Community or Central Subsurface Sewage Disposal System</b>			
35	State type of system	<input type="checkbox"/>	<input type="checkbox"/>	
36	Provide letter of approval of the engineered design by DEQ	<input type="checkbox"/>	<input type="checkbox"/>	
37	Provide a letter of a contractual agreement with the responsible management entity	<input type="checkbox"/>	<input type="checkbox"/>	
38	Provide a copy of the “as built” Plan certification by DEQ	<input type="checkbox"/>	<input type="checkbox"/>	
	<b>Wells (individual)</b>			
39	Provide a statement and documentation of the availability and sources of water to meet the demands of the parcels in the development	<input type="checkbox"/>	<input type="checkbox"/>	
40	Verify that each lot has a well location that meets the recommended setback standards for wells	<input type="checkbox"/>	<input type="checkbox"/>	
41	Provide a map of groundwater flow direction	<input type="checkbox"/>	<input type="checkbox"/>	
42	Provide a map showing the approved water sample points	<input type="checkbox"/>	<input type="checkbox"/>	
43	Provide nitrate results from water samples; also provide copies of lab reports and chain of custody forms	<input type="checkbox"/>	<input type="checkbox"/>	
44	Furnish a statement that nonfunctioning water wells have been properly abandoned to Idaho Department of Water Resources requirements.	<input type="checkbox"/>	<input type="checkbox"/>	
	<b>Public Water Wells (community and non-community)</b>			
45	Approval of system by SCPHD or provide letter of approval of engineered design by DEQ	<input type="checkbox"/>	<input type="checkbox"/>	
46	Provide a copy of the Water System Operation and Maintenance Manual to SCPHD, DEQ, and The Homeowner’s Association.	<input type="checkbox"/>	<input type="checkbox"/>	
47	Provide a letter from the entity providing water to the development stating that they will service the development	<input type="checkbox"/>	<input type="checkbox"/>	
48	Provide a copy of the “as built” plan certification.	<input type="checkbox"/>	<input type="checkbox"/>	
	<b>Solid Waste</b>	<input type="checkbox"/>	<input type="checkbox"/>	
49	State method proposed to handle solid waste from this development	<input type="checkbox"/>	<input type="checkbox"/>	
	<b>Air Quality</b>			
50	Provide a statement of the existing ambient air quality in the immediate vicinity.	<input type="checkbox"/>	<input type="checkbox"/>	
51	Furnish a statement as to the effect of the development on the existing ambient air quality	<input type="checkbox"/>	<input type="checkbox"/>	
52	State the dust control measures that will be employed during the construction of this subdivision	<input type="checkbox"/>	<input type="checkbox"/>	
	<b>Water quality</b>			
53	If surface water (lakes, streams etc.) are located within the development, provide a statement of the existing water quality	<input type="checkbox"/>	<input type="checkbox"/>	
54	Furnish a statement as to the effect of the development on existing water quality	<input type="checkbox"/>	<input type="checkbox"/>	
	<b>Hazards to Safety and Environment</b>			
55	Submit a statement that hazards such as abandoned underground storage tanks, toxic wastes, etc., have been corrected or are not present.	<input type="checkbox"/>	<input type="checkbox"/>	
	<b>Noise Pollution</b>			
56	Submit an evaluation of the existing and projected noise pollution in the surrounding area.	<input type="checkbox"/>	<input type="checkbox"/>	
	<b>Other Agency Approvals</b>			
57	Provide copies of letters of approval from applicable jurisdictions to include cities, counties, planning and zoning commissions, area of impact, and others.	<input type="checkbox"/>	<input type="checkbox"/>	



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58	<b>Other Items, as needed:</b>	<input type="checkbox"/>	<input type="checkbox"/>	
59	<b>All SCPDH correspondence</b>	<input type="checkbox"/>	<input type="checkbox"/>	
60		<input type="checkbox"/>	<input type="checkbox"/>	
61		<input type="checkbox"/>	<input type="checkbox"/>	
62		<input type="checkbox"/>	<input type="checkbox"/>	
63		<input type="checkbox"/>	<input type="checkbox"/>	
64		<input type="checkbox"/>	<input type="checkbox"/>	
65		<input type="checkbox"/>	<input type="checkbox"/>	
66	<b>Final Plat</b>	<input type="checkbox"/>	<input type="checkbox"/>	
67	Correct Health Certificate with sanitary restriction wording	<input type="checkbox"/>	<input type="checkbox"/>	
68	Place any applicable plat notes on the plat	<input type="checkbox"/>	<input type="checkbox"/>	

Attached to this check-list is the completed application report for the above named subdivision.

Developer Signature: \_\_\_\_\_ Date \_\_\_\_\_

and/or

Engineer Signature \_\_\_\_\_ Date \_\_\_\_\_

Instructions: Attach this completed checklist to the top of the Subdivision application packet and turn it in with the packet for review.

**Health Certificates** - Idaho Code Section 50-1326 states in part: "**All plats to bear a sanitary restriction...** Any plat of a subdivision filed in accordance with Chapter 13, Title 50, Idaho code... shall be subject to the sanitary restriction." To satisfy this requirement, the State of Idaho's Technical Guidance Committee for Individual and Subsurface Sewage Disposal, in conjunction with the Attorney General's Office, has developed the following language to be placed on the face of the plat.

**For subdivisions with on-site water and sewer.**

After it is shown that each lot in the subdivision is suitable for a well and septic system, the following Health Certificate is to be used to lift sanitary restrictions on the whole subdivision.

<b>HEALTH CERTIFICATE</b>	
Sanitary restrictions as required by Idaho Code, Title 50, Chapter 13 have been satisfied. Sanitary restrictions may be reimposed, in accordance with Section 50-1326, Idaho Code, by the issuance of a certificate of disapproval.	
REHS, South Central Public Health District	Date

**For subdivisions that have no immediate plans to develop or that may re-subdivide later prior to development.**

This health certificate is to be used at the direction of the REHS of South Central Public Health District.

<b>HEALTH CERTIFICATE</b>	
Sanitary restrictions as required by Idaho Code, Title 50, Chapter 13 are in force. No owner shall construct any building, dwelling, or shelter which necessitates the supplying of water or sewage facilities for persons using such premises until sanitary restriction requirements are satisfied.	
REHS, South Central Public Health District	Date

**The following plat note is suggested for subdivisions that require designated locations for well and septic systems.**

<b>PLAT NOTE</b>	
The lots on this plat are subject to restrictions concerning the location of wells and septic systems. These restrictions are on file at South Central Public Health District. Septic system permits shall not be issued unless they conform to these restrictions.	

**Authority reference:** Idaho code Title 50, Chapter 13, 50: 1326-29; Title 54, Chapter 12 and 20, 54-1202 (B) 39-408 – 409.

**Idaho Code references:**

**Plat maps:** Title 50, Chapters 1 and Chapter 13; Title 39, Chapter 36

**Sewage disposal systems:** Title 39, Chapter 1 and 36; Title 1, Chapter 3

**Public sewage disposal systems:** Code 39, Title 50, Chapter 13

**Water systems:** Title 37, Chapter 21; Title 39, Chapter 1; Title 50, Chapter 13; Title 1, Chapter 8

**Air quality:** Title 39, Chapter 1

**Water quality:** Title 39, Chapters 1 and 36

**Hazards to safety and environment:** 52-101

**Noise pollution:** 52-101

**Final Plat:** 50-1326, Chapter 13, Title 50

**Resources from the web:**

Please check our website [www.phd5.idaho.gov](http://www.phd5.idaho.gov) click on Environment, then Land development to find the following documents:

One-Acre Minimum for Individual Subsurface Sewage Disposal Systems - [Policy .795](#)

\*Nutrient Pathogen Studies - [Policy .885](#)

Nutrient Pathogen Algorithm - [Protocol .885A-01](#)

Nitrate Priority Areas - [Protocol .885A-02](#)

Environmental Health - [Fee Schedule](#)

**Others sites:**

Individual and Subsurface Sewage Disposal - [Technical Guidance Manual](#)

Soil maps and surveys - <http://websoilsurvey.nrcs.usda.gov>

Wetlands information, Army Corps of Engineers, Walla Walla District, 900 North Skyline Drive, Suite A, Idaho Falls, Idaho 83402-1718 Phone 208-522-1645 - [www.nww.usace.army.mil](http://www.nww.usace.army.mil)