



**Environmental Services Department
Water & Waste Management
On-Site Wastewater Treatment Program**

CLOSURE/ABANDONMENT OF AN ON-SITE WASTEWATER TREATMENT FACILITY

This packet gives instructions on how to prepare and submit a General Application, Complete and Report a Permanent Closure/Abandonment.

Water & Waste Management Division, 1001 North Central Ave, Suite 150, Phoenix, Arizona 85004

Office hours 8:00am to 5:00pm Monday thru Friday except Holidays

Telephone: (602) 506 6666 FAX (602) 506-6925 Web: www.maricopa.gov/envsvc/ E-mail septicquestions@mail.maricopa.gov

December 2012



Maricopa County

Environmental Services Department

1001 N. Central Ave. Suite 150
Phoenix, AZ 85004-1940
Phone: (602) 506-6681
Fax: (602) 506-6925
TTD: (602) 506-6704
www.maricopa.gov/envsvc

PERMIT APPLICATION PROCESS NOTICE

Onsite Wastewater Program

Steps required to obtain an Abandonment permit are as follows:

1. **Prior to submittal**, if the existing permit number is not available or unknown, complete a Public Record Request. Information on how to do this is at the link below: <http://www.maricopa.gov/EnvSvc/WaterWaste/OWS/SepticSearch.aspx>
2. **Submit Abandonment application**. Include all supporting documentation as listed on the Closure/Abandonment Requirements page found in this packet and applicable fees.
3. **A contractor**, licensed by the State of Arizona, completes the abandonment of the onsite system in accordance with applicable rules and regulations.
4. **An Affidavit of Abandonment** is submitted by the contractor in lieu of an inspection, if permitted by the Department.
5. **An Administrative Review** of the Abandonment permit in accordance with applicable rules and regulations is done by MCESD.
6. **Approval** is given upon completion of the administrative review and a Certification of Abandonment Letter is provided upon request.
7. **Inspection** of the abandonment, if the affidavit is not permitted, is to verify that the abandonment was completed in accordance with applicable rules and regulations. Additional fees are required for the inspection.

Per Maricopa County Health Code, this application will expire: a) one year from date of application.

Department contact information regarding your application

Telephone: 602-506-6616, ask for the Onsite Program

E-mail: septicquestions@mail.maricopa.gov

Website: <http://www.maricopa.gov/EnvSvc/WaterWaste/OWS/OWS.aspx>

You may request a clarification from the Department of its interpretation or application of a statute, ordinance, regulation, delegation agreement or authorized substantive policy statement as provided in A.R.S. §11-1609. Contact us by in by e-mail or telephone, or in person or mail at the address listed at the top of the page, marked attention Onsite Wastewater Program.

Licensing Time Frames Onsite Wastewater

Permit Category	Overall time (days)
Alteration	30
Alteration with Inspection	30
Composting Toilet <3000 Gal/Day	73
Septic Tank with Additional Alternative Features	95
Septic Tank, Conventional Disposal <3000 Gal/Day	73
Aerobic System with Surface Disposal	95
Onsite Wastewater Treatment Facility, Flow 3000 to <24000	136
Reconnect/Remodel Review (Minor Plan Review)	30
Reconnect/Remodel Review (Minor Plan Review) with Inspection	30

A.R.S. §11-1604. Prohibited acts by county and employees; enforcement; notice

- A. A county shall not base a licensing decision in whole or in part on a licensing requirement or condition that is not specifically authorized by statute, rule, ordinance or delegation agreement. A general grant of authority does not constitute a basis for imposing a licensing requirement or condition unless the authority specifically authorizes the requirement or condition.
- B. Unless specifically authorized, a county shall avoid duplication of other laws that do not enhance regulatory clarity and shall avoid dual permitting to the maximum extent practicable.
- C. This section does not prohibit county flexibility to issue licenses or adopt ordinances or codes.
- D. A county shall not request or initiate discussions with a person about waiving that person's rights.
- E. This section may be enforced in a private civil action and relief may be awarded against a county. The court may award reasonable attorney fees, damages and all fees associated with the license application to a party that prevails in an action against a county for a violation of this section.
- F. A county employee may not intentionally or knowingly violate this section. A violation of this section is cause for disciplinary action or dismissal pursuant to the county's adopted personnel policy.
- G. This section does not abrogate the immunity provided by section 12-820.01 or 12-820.02.

Maricopa County Environmental Services Department
 Water & Waste Management Division
 (Delegated Authority for ADEQ)
 1001 N Central Ave, Suite 150
 Phoenix, AZ 85004
 Phone: (602) 506-6666
 Fax: (602) 506 6925



GENERAL ONSITE APPLICATION

Web: www.maricopa.gov/EnvSvc/
 E-mail: septicquestions@mail.maricopa.gov

The undersigned hereby requests that the MCESD Water and Waste Management Division conduct the review or inspection selected below at the site named. An inspection report is provided as required by A.R.S. §41-1009; in person, via mail, e-mail, or FAX. Please indicate your preference by checking the boxes below.

- (Check one): **Site Investigation--\$325 per visit**
 Site and Test Hole Inspection--\$325 per visit
 Misc. Review/Reconnect Plan Review, existing permit # _____ --\$205
 Septic System Abandonment/Closure existing permit # _____ --\$175

SITE INFORMATION

Property Address: _____ Maricopa County, AZ _____

If no address has been assigned, leave blank Street Name and Number City (if applicable)

Cross Streets _____ Parcel Number _____ - _____ - _____

Subdivision Name (if applicable): _____ Lot#(s) _____

Legal Description: Section _____ Township _____ Range _____ Acreage _____

Sewer (circle one) **IS / IS NOT** available within 400'
 from the property.

Identified as (check one):

Single Family Residence

Commercial

Type of Establishment: _____

Maximum number of users: _____
 (Customers, employees, members, etc.)

For a Review/Reconnect, indicate reason for request:

Water Service will be provided by (check all that apply):

Water Company—Name _____

Holding Tank

Existing Well ID Number: _____

Proposed/Future Well

Shared? Yes No

MC P/D Tracking # B _____

Site Code: _____

Permit / File #

OWNER AND AGENT INFORMATION

Property Owner Name: _____

Complete Mailing Address: _____ Zip Code: _____

Owner's Phone: (required) _____ Owner's FAX _____ Owner's e-mail _____

Applicant/Agent Name: _____ Attention: _____

Complete Mailing Address: _____ Zip Code: _____

Phone: (required) _____ Applicant/Agent's Fax _____

Mobile: _____ Applicant/Agent's e-mail address _____

APPLICANT ACKNOWLEDGEMENT

I, the undersigned, agree it is my responsibility to comply with all applicable statues, rules, codes, ordinances and regulations for the work requested. Safety is the responsibility of property owner or their agent. **Request for inspection must be called in to the Inspection Request Line at 602-506-1787. To avoid additional inspection fees, be sure to include access information e.g. gate code and/or other special instructions or requests e.g. meet at site.**

Per Maricopa County Health Code, this application will expire: a) one year from date of application, or b) one year from Phase I site plan approval.

Signature: _____ Date: _____

Amount: \$ _____ Date Issued _____ Issue Status _____ By: _____ Expiration Date: _____



ONSITE WASTEWATER TREATMENT FACILITY OR CESSPOOL Closure/Abandonment Requirements

Arizona Administrative Code R-18-9-A309; Maricopa Environmental Health Code Chapter 2 Section 8

A person who permanently discontinues use of, wishes to close an on-site-wastewater treatment facility (septic system) or a cesspool (including capped or block lined seepage pit), or is ordered by the Director to close and abandon a facility shall:

Prior to application, if the existing permit is not available or the permit number is unknown submit a Commercial Public Records Request. (Forms are attached)

Submit a completed General Application, recorded deed, site plan to scale, copies or numbers of associated permits and \$175 fee. If inspection is required for closure of the septic system an additional fee of \$325 per inspection visit is charged.

Then Proceed to:

- 1) Remove all sewage from the facility and dispose of in a lawful manner.
- 2) Disconnect and remove electrical and mechanical components.
- 3) Cut and plug both ends of the abandoned sewer drain pipe between the building and the on-site wastewater treatment facility not more than five feet outside the building foundation, if practical, or cut and plug as close to each end as possible.
- 4) Remove or collapse the top of any tank or containment structure using one of the following methods:
 - a) Punch a hole in the bottom of the tank or containment structure; fill the tank with material consisting of earth, sand, gravel, concrete or other approved fill material
 - b) Remove entire tank and dispose of in a lawful manner, fill the cavity material consisting of earth, sand, gravel, concrete or other approved fill material
- 5) Re-grade the surface to provide drainage away from the closed area.
- 6) The Department must be notified within 30 days of closure. This requirement is met by submission of the attached Certification of Closure/Abandonment of an Onsite Wastewater Treatment Facility.

If an inspection is required at the site for the Closure/Abandonment call the inspection phone number 602-506-1787. Have permit number available when you call. The inspector will provide instruction on how to proceed.



Maricopa County

Environmental Services Department
Water and Waste Management Division

Date: _____

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Phone: (602) 506-6666
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TDD: (602) 506-6704
www.maricopa.gov/envsvc

Septic Permit Research Request

Fax completed form to 602-506-6925 or e-mail to septicquestions@mail.maricopa.gov

TO CUSTODIAN OF RECORDS OF: **Onsite Wastewater Treatment Program**

I am requesting septic permit research for the following:
(One form per address/parcel.)

Site address: _____

Previous addresses (if known): _____

Year system installed: _____

Assessor Parcel #: _____

Subdivision Name: _____ Lot #: _____

- SYSTEM FAILING (check this box if system is backing up)
- Standard Research **(\$30 fee is required for all standard requests)**
- Expedited Research **(\$60 fee is required for all expedited requests)**

Date: _____

(Requester Signature)

Records found will be emailed unless otherwise requested by the customer. Plan on 3 -7 business days for the search to be completed. Expedited requests will be returned within 1-2 business days.

NOTE: Not all searches/research produce a record.

DISCLAIMER INDEMNIFICATION

Requester/Purchaser understands and agrees that Maricopa County does not guarantee the accuracy of the data and information requested and hereby expressly disclaims any responsibility for the truth, lack of truth, validity, invalidity, accuracy, inaccuracy of any said data and information. Requester/Purchaser accepts responsibility for Requester/Purchaser's unauthorized use or transmission of any such data or information in its actual or altered form.

Requester Information (please type or print clearly)

Name _____

Address _____

Phone _____ Fax _____

Email _____

FOR ADMINISTRATIVE USE ONLY:	Date returned to customer : _____	
Receipt #: _____	Date of payment: _____	Payment type/check #: _____
Billing Code _____	Returned to customer by: _____	