



# Portage County Combined General Health District Operation Permit for Household Sewage Treatment System

999 East Main Street, 2<sup>nd</sup> Floor • Ravenna, Ohio 44266  
Phone: 330-296-9919 • Fax: 330-297-3597

## Aeration to Leach Lines

HEALTH DISTRICT

**This operation permit shall be in effect upon PCHD's final evaluation & approval of the HSTS installation. All operation and maintenance requirements indicated on the approved design plan must be followed.**

**Service/Monitoring/Maintenance Frequency: Two times per year**

### OPERATION & MAINTENANCE REQUIREMENTS:

- Check sludge levels in tanks and pump when needed.
- Checking surface grade/vegetative cover for erosion or settling & any evidence of seepage.
- Checking for ponding in the distribution area.
- Checking for surface water infiltration or clear water flows from the dwelling or structures into the system components & around or onto the soil absorption area.
- Monitoring for proper operation of mechanical components and/or distribution methods.
- Review & document event counters, elapsed time meters, flow meters, & alarm conditions where present.
- Monitoring the liquid level or capacity of the leaching trench soil absorption component.
- Management of flow diversion mechanisms for the purpose of resting portions of the soil absorption area.
- Maintain a service contract with an authorized service provider for the lifetime of the HSTS.
- I understand that if sanitary sewer becomes available and accessible, I must properly abandon my HSTS, regardless of functionality, and connect to the sanitary sewer at the time it becomes available.

**This Operation Permit is valid for a period of 5 Years from the effective date. Thereafter, it will expire & will be renewed at a fee, provided compliance with all applicable O&M requirements has been demonstrated at the specified frequency.**

Owner's Name:

Phone #:

Property Address:

Township:

Permit #:

Date Issued: \_\_\_\_\_

Effective date: \_\_\_\_\_

Expiration date: \_\_\_\_\_

\_\_\_\_\_  
Property Owner's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Approved By

\_\_\_\_\_  
Date