



**HENRY  
COUNTY  
HEALTH  
DEPARTMENT**

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*PROMOTING HEALTH AND QUALITY OF LIFE FOR ALL RESIDENTS OF HENRY COUNTY*

## **Pond Water Supply Permit Application Process**

### **Instructions**

#### **Step 1**

- The following forms must be completed:
  - *Application/Permit for a Private Water System*
  - *Site Plan*
  - *Additional Site Plan* (contact your contractor(s) to complete)
    - This includes details on the pond construction and the disinfection/filtration system
  - *Pond Variance Request*

#### **Step 2**

- Indicate on plans where the excavated material will be used or moved. (ex. will it be used for fill around the house, or an embankment around pond, etc). If the soil is to remain on your property, print the following statement on your plans:  
**“SOIL EXCAVATED FROM THE POND SITE WILL NOT BE PLACED IN THE AREA TO BE USED FOR THE SEWAGE TREATMENT SYSTEM OR ITS DESIGNATED REPLACEMENT AREA”.**
- If the pond is not on the same property as the home, include a copy of a recorded easement for the purpose of providing water from the pond to the dwelling.
- Is the property located in a flood plain? If so, then a registered surveyor must determine flood elevations to verify that the pond surface is at least 1 foot above the flood plain elevation. Include all relevant elevation points on plans.

#### **Step 3**

- Submit the completed *Application/Permit for a Private Water System*, *Site Plan*, *Additional Site Plan* and *Pond Variance Request* forms to the Henry County Health Department
- The Health Department will review to verify that the information is complete.
- When the permit is issued, copies will be provided to the owner/applicant and the contractor(s).
- After issuance, the permit will be valid for 12 months with a possible 6 month extension.

# Private Water System

## APPLICATION INSTRUCTIONS

- 1) This is a two part form: APPLICATION and SITE PLAN
- 2) The form may be completed:
  - a) By computer, then printing; or
  - b) By printing the blank document, and filling all information with a typewriter or pen;
- 3) Contact the Local Health Department for the following information:
  - a) Fee information;
  - b) Site Plan completion information (some local health districts require staff to complete site plans);
  - c) Rule information.
  - d) Registered private water system contractor information.
    - i) A complete list of registered private water system contractors is available on the Ohio Department of Health website at <http://www.odh.ohio.gov/odhPrograms/eh/water/water1.aspx>.
- 4) The applicant must sign and date the application prior to submitting to the Local Health District.
- 5) The applicable FEES must accompany all applications when submitting to the Local Health District. Applications will not be processed until all fees have been received by the Local Health District.
- 6) The Local Health District will review the application and site plan and notify you as to the application's status.
- 7) Contact the Local Health District if you do not receive information about the application status within fifteen (15) business days of submitting the application.

County / City	Local Fee	State Fee	Total Fee Owed	Receipt #	Permit #
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# OHIO DEPARTMENT OF HEALTH

## APPLICATION/PERMIT FOR A PRIVATE WATER SYSTEM

**NOTE: Read the application instructions on the next page.**

**Complete form as directed. Form may be completed on the computer then printed or printed and completed by pen or typewriter.**

**CHECK ALL BOXES, IN THIS SECTION, THAT APPLY TO THE PERMIT REQUEST.**

Type of Work: <input type="checkbox"/> <u>New Construction</u> <input type="checkbox"/> <u>Replacement System</u> <input type="checkbox"/> <u>Alteration</u> (includes expanding existing systems) <input type="checkbox"/> <u>Emergency Construction</u> <input type="checkbox"/> <u>Emergency Alteration</u> <input type="checkbox"/> <u>Sealing Only</u> <input type="checkbox"/> <u>Conversion to a PWS</u> <input type="checkbox"/> <u>Test Well</u>	System will Serve: <input type="checkbox"/> Single family dwelling <input type="checkbox"/> Two or Three family dwelling <input type="checkbox"/> Multiple dwelling units* (includes MHPs / Campgrounds) <input type="checkbox"/> Building*	Type of PWS or Component: <input type="checkbox"/> Well <input type="checkbox"/> Spring* <input type="checkbox"/> Pond* <input type="checkbox"/> Cistern* <input type="checkbox"/> Hauled Water Tank <input type="checkbox"/> Continuous Disinfection <input type="checkbox"/> Other _____	System being Sealed: <input type="checkbox"/> Well <input type="checkbox"/> Cistern <input type="checkbox"/> Hauled Water Tank <input type="checkbox"/> Pond <input type="checkbox"/> Spring
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Public Water Supply is being connected to the residence       Geothermal system exists or is planned for this property

**\*NOTE:** If the private water system will serve other than a one, two, or three family dwelling, detailed plans must also be submitted in compliance with rule 3701-28-03 (E) of the Ohio Administrative Code. See site plan addendums for ponds, springs, cisterns, multiple dwelling units, and buildings.

**COMPLETE THE FOLLOWING INFORMATION**

<b>Property Street Address or Location (include City and Zip Code)</b>	<b>Parcel # (optional)</b>	<b>Township/City/Village</b>
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<b>Owner's Name</b>	<b>Owner Mailing Address (Street #, Street, City, State, Zip Code)</b>	<b>Phone #</b>
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Check this box if the Owner and Applicant Information is the same. If checked do not fill in applicant information.

<b>Applicant's Name</b>	<b>Applicant Mailing Address (Street #, Street, City, State, Zip Code)</b>	<b>Phone #</b>
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All persons, including homeowners, performing work on a private water system must be registered with the Ohio Department of Health as required in Ohio Administrative Code Rule 3701-28-18(A). If the contractor information is not known at time of application, it must be provided prior to the commencement of work as per the requirements in Ohio Administrative Code Rule 3701-28-03(A)(1).

<b>Private Water Systems Contractor</b>	<b>ODH Registration #</b>	<b>Phone #</b>
<b>Private Water Systems Contractor</b>	<b>ODH Registration #</b>	<b>Phone #</b>
<b>Private Water Systems Contractor</b>	<b>ODH Registration #</b>	<b>Phone #</b>

**Notice to Applicant:** This application will not be processed until the form bears the signature of the applicant and the date (below). This application must be accompanied by the site plan form(s) and the appropriate fee. This application is not approved until it has the date and signature of a registered sanitarian or sanitarian-in training employed by the local board of health.

I, the undersigned, hereby agree to install, construct, develop or alter the private water system named in this permit application in accordance with the attached site plan and all applicable rules governed by Chapter 3701-28 of the Ohio Administrative Code.

I, the undersigned, also understand that the issuance of this permit is conditioned upon the right of the department to enter upon the premises of the private system named in this permit at any reasonable time prior to, during, or after completion of the work specified in this permit for the purpose of determining compliance with Chapter 3701-28 of the Ohio Administrative Code.

I, the undersigned, agree to contact the local health department upon completion of the private water system in order for the local health department to perform the final inspection and collect the water sample.

I, the undersigned, understand that this permit will expire one (1) year from the date approved and all work must be completed by that date.

<b>APPLICANT'S SIGNATURE</b>	<b>DATE OF SIGNATURE</b>
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**READ THE INSTRUCTIONS ON THE NEXT PAGE, THEN COMPLETE THE SITE PLAN FORM**

County / City

Permit #

**HEALTH DEPARTMENT USE ONLY**

This permit is not valid without the sanitarian signature, approval date, and audit number.

**Is a variance being requested prior to the permit being issued?**

Yes If checked yes, complete the variance section on the Administrative Summary.

**APPLICATION APPROVED BY (RS or SIT Only)**

**DATE APPROVED**

*Permit expires one (1) year from this date.*

PLACE AUDIT  
STICKER HERE

**PERMIT EXTENSION**

Approved By

Date Approved

Date Extension Expires

**See comments on the Administrative Summary**

County / City

Permit #

# OHIO DEPARTMENT OF HEALTH APPLICATION/PERMIT FOR A PRIVATE WATER SYSTEM SITE PLAN

Property Address

Owner / Applicant

Prepared by

A site plan addendum form will be required in addition to this site plan form if this private water system permit request is being obtained for:

- 1) any private water system servicing greater than a three family dwelling, or a building;
- 2) any private water system servicing a pond, cistern, spring, or private water system located in an area of known flowing well conditions.

### SITE PLAN DRAWING

Check this box if the drawing is supplied on a separate sheet.

- Clearly indicate the location of all proposed and existing private water systems.
- Clearly indicate all possible sources of contamination from the list to the right, including but not limited to the house, the sewage system and the driveway.
- Clearly indicate the north direction, property lines, roads and road intersections.

### LIST OF POTENTIAL CONTAMINATION SOURCES.

Write the distance from the proposed private water system location to the source listed below, if applicable. The minimum distance requirements are indicated in ( ) to the right of the source.

**All distances must be specific to the private water system.**

- \_\_\_\_\_ ft House, Building (10ft)
- \_\_\_\_\_ ft Property lines (10 ft)
- \_\_\_\_\_ ft Existing or properly sealed water wells (10 ft)
- \_\_\_\_\_ ft Road right-of-ways and road utility easements (10 ft)
- \_\_\_\_\_ ft Public Roadways (25 ft)
- \_\_\_\_\_ ft Driveway or parking lot (5 ft)
- \_\_\_\_\_ ft Sewer - watertight (10 ft)
- \_\_\_\_\_ ft Sewage tanks, sewage absorption fields and watertight vault privies (50 ft)
- \_\_\_\_\_ ft Leaching privies, leaching pits, dry wells, or drainage wells (100 ft)
- \_\_\_\_\_ ft Unregulated constructed wells or boreholes (50ft)
- \_\_\_\_\_ ft Closed loop geothermal systems (25 ft)
- \_\_\_\_\_ ft Streams, lakes, ponds (25 ft)
- \_\_\_\_\_ ft Storm water and other ditches with intermittent water flow (15 ft)
- \_\_\_\_\_ ft Natural gas or propane tanks (20 ft)
- \_\_\_\_\_ ft Fuel oil, diesel, chemical, gasoline and other petroleum liquid tanks (50 ft)
- \_\_\_\_\_ ft Oil and gas wells (100 ft)
- \_\_\_\_\_ ft Landfills (1000 ft)
- \_\_\_\_\_ ft Construction and demolition debris facility (500 ft)
- \_\_\_\_\_ ft Agricultural manure ponds, lagoons, or piles (50-300 ft)
- \_\_\_\_\_ ft Other: \_\_\_\_\_

Comments

Please refer to OAC 3701-28-07 for additional required distances.




# Private Water System – Pond or Spring Construction Plan

This form is used *in addition* to the Permit Site Plan HEA 5204 as per OAC rule 3701-28-03 (E) and (F).  
 This form should be completed for the construction details of Ponds or Springs.

Property Street Address (include City and Zip Code)		Township	Health District
Property Owner	PWS Contractor(s)	Form prepared by	

**NOTE:** This form may be used *in addition* to the Permit Site Plan HEA 5204 as per OAC rule 3701-28-03 (E) and (F).  
 Complete all of the following information for work to be performed.

 <b>N</b>	Sketch or provide a topographic map section with proposed pond or spring location and indicate all water shed flow directions
Alternate cross section view for irregular shaped ponds	
[Large grid area for sketching and drawing]	





# Private Water System – Disinfection/Filtration Systems Plan

This form is used *in addition* to the Permit Site Plan HEA 5204 as per OAC rule 3701-28-03 (E) and (F).  
This form should be completed for Ponds, Cisterns, and Springs or any other system using continuous disinfection or filtration systems.

Property Street Address (include City and Zip Code)

Township

Health District

Property Owner

PWS Contractor(s)

Form prepared by

List and provide details of all applicable pumping and treatment devices. Neatly sketch and label the listed components in order from water source to the end of treatment.

**Pond Intake:**

- Floating
- Cased – Indicate depth casing to be set: \_\_\_\_\_
- Disinfection System:**
- Chlorine
- Iodine
- Ultraviolet
- Ozone
- Filtration System:**
- Slow Sand
- Other: \_\_\_\_\_
- Pressurized Rapid Sand
- Pre-coat

ID	Component	Make/Model #/Capacity/Dimensions	ID	Component	Make/Model #/Capacity/Dimensions
	Floating pond filter			Retention Tank 2	
	Water System Pump			Rapid Sand Filter	
	Pressure Tank			Slow Sand Filter	
	Coagulation Chemical Tank			Cartridge Filter(s) qty. _____	
	Chemical Pump 1			Cyst Reduction Filter(s) qty. _____	
	Retention Tank 1			Pre-coat Filter	
	Chemical Disinfectant Tank			Ozone Device	
	Chemical Pump 2			Ultraviolet Light	
	→ FROM WELL POND, SPRING OR CISTERN				





# HENRY COUNTY HEALTH DEPARTMENT

1843 OAKWOOD AVENUE  
NAPOLEON, OHIO 43545

PHONE: 419 599-5545  
FAX: 419 599-1714

E-MAIL: [healthdt@henrycohd.org](mailto:healthdt@henrycohd.org)

*Promoting Health and Quality of Life for all Residents of Henry County*

## Pond Variance Request

Owner's Name:	Phone:
Current Mailing Address:	
Address or Location of Pond:	Township:

### Evaluate Alternatives to Pond Water Source

Ohio Administrative Code section 3701-28-14 (A) states that "Ponds shall be considered as a source of water for human consumption at the discretion of the board of health, based on available ground water sources being adequate for the intended use or unacceptable due to the presence of naturally occurring or man-made contaminants that are not economically or technically feasible to treat, and on the ability of the property owner to meet all of the following requirements of this rule. A pond shall not be acceptable as a new water supply source when a public water supply is readily accessible to the property as determined by the board of health. The board of health can choose not to approve an application for a permit for a pond as a private water system if there is incomplete or inconclusive information about the suitability for a pond system at a specific site."

The Henry County Health Department does not recommend the installation of ponds as a potable water source. We will only consider issuing a permit for the installation of a pond for use as a potable water source upon careful evaluation of your request.

The Health Department requires that you state below those reasons that have led you to the conclusion that ground water sources are inadequate or unacceptable for potable use and as a result your desire to install a pond system. If a well installation attempt resulted in a dry hole, please attach a completed well log from your contractor documenting the dry hole and a sealing report.

### Pond Water Problems

1. Water used to fill ponds may contain any/all of the following: pesticides, herbicides, nitrates, sewage effluent, livestock yard drainage, wild animal and fowl contamination, road drainage (accidental spills), and industrial and commercial drainage.
2. Water in pond is subject to contamination from surface runoff, subsurface drainage, and drifting agriculture pesticides and herbicide sprays.
3. Treatment of water will not be adequate to remove viruses, bacteria spores, cryptosporidium, giardia or chemicals.
4. The treatment system requires routine maintenance and must be continuously functioning as designed.
5. Disinfectants will not kill cryptosporidium and giardia spores.
6. Ponds are subject to contamination from accidents or intentional sabotage.
7. Safety and liability issues are present due to accidental drowning, etc.

Generally, these problems are not found in deep well water. All water used in the home must be free of contaminants. Human contact with contaminated water may cause illness.

# Request for Variance from Ohio Administrative Code Chapter 3701-28 "Private Water Systems Rules".

Below is the section of the Ohio Administrative Code that you are requesting a variance from:

Section 3701-28-14 (D) (2) states, "A pond shall not be recharged by pumping water from field drain tiles or drainage ditches. Ponds shall not be recharged from onsite wastewater system discharges, curtain drains, sump pumps or washing machines."

Finding an acceptable source of water to initially fill a pond can be very difficult. The preferred method is to allow the pond to fill with rainwater. This process can take several years. Another acceptable alternative is to fill the new pond with water from an existing pond over a period of time. However, some property owners remove water from a near-by drainage ditch to fill the newly constructed pond. This practice is not recommended due to the numerous unknown natural and man-made contaminants that are present in these ditches. Testing of this water can be expensive. At a minimum the water should be tested for fecal coliform, nitrates, herbicides and pesticides to determine its quality. Do not pump from a drainage ditch for 2-3 days after a heavy rain. The rain may wash excess contaminants into the ditch thus making concentrations higher. Wait for two to three days after rainfall has stopped to begin pumping.

**Note: The Henry county board of health shall not consider a variance to Ohio Administrative Code section 3701-28-14 (B) which states:**

"The pond and watershed shall be under the complete control of one pond owner and the watershed shall be located on a parcel or parcels under one deed with the dwelling to which it is supplying water. If control of the watershed cannot be maintained on parcels under the same deed then other private water system sources shall be considered. The board of health shall not consider a variance to this rule."

Your signature below indicates that you have read and understand the conditions of this variance request and accept the inherent risks of utilizing a pond for a potable water source. It is your responsibility to disclose this information to future owners of this property.

**Owner Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

-----Office Use Only-----

Staff Comments:

Approved

Disapproved

\_\_\_\_\_  
Director of Environmental Health

\_\_\_\_\_  
Date