

# TOWN OF SCITUATE

## BOARD OF HEALTH



600 Chief Justice Cushing Hwy  
Scituate, Massachusetts 02066  
Telephone (781) 545-8725  
Fax (781) 545-8866

To: Title 5 Septic System Designers

From: Scituate Board of Health

Date: February 1, 2018

Re: Septic System Design Plan and As-Built Plan Submittals

The Scituate Board of Health continues to receive an increasing number of septic system design plans and associated as-built plans for review. Within the last six months, this office has been required to review the same design plan or as-built plan numerous times prior to issuing a permit or certificate of compliance, respectively, and has been providing consistent comments on these plans. Thus, in an effort to facilitate our review process and streamline your design and revision efforts, the Board of Health would like to provide you with two checklists, one for septic system design plans and one for as-built plans. A completed copy of the appropriate checklist should be submitted with each plan. Of course, the checklist cannot identify every item that should be included on a plan, but instead provides the items that the office routinely identifies as comments following review. The checklists will be updated as necessary and posted on the Scituate Board of Health website. Please review the website for any updated guidance.

We hope that providing these checklists assists you in your efforts.

Sincerely,

Jennifer Keefe

Director of Public Health

Scituate Board of Health



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## SEPTIC DESIGN PLAN REVIEW CHECKLIST FOR ENGINEER/SANITARIAN SUBMITTALS

Location: \_\_\_\_\_

Designer: \_\_\_\_\_

Phone #: \_\_\_\_\_ Fax#: \_\_\_\_\_

Email address: \_\_\_\_\_

**\*\* Note that the following checklist is not necessarily the only information to be provided on a design plan but is to serve as a guide. This list will be updated as necessary by the BOH. A completed copy of this checklist shall be submitted with each proposed design plan.**

- ☐ 1. Maximum of 1"=20' Scale
- ☐ 2. Location and dimensions of system, including reserve area for new construction
- ☐ 3. Design flow calculations (110gal/bdrm/day, or other, as required)
- ☐ 4. Septic Tank- 1,500-gallon minimum with filter or equivalent, as required
- ☐ 5. Garbage grinder allowed- Yes: \_\_\_\_\_ No: \_\_\_\_\_
- ☐ 6. Septic system calculations (leaching facility sizing in square feet and gpd)
- ☐ 7. Provide copies of engineer soil logs (Form 11), perc test data (Form 12) or sieve analysis and identify location of test pits with data on the plan
- ☐ 8. Location of existing and proposed water supply shown on the plan
- ☐ 9. Perc tests within tidal areas conducted during 11' high tide where applicable (local regulations)
- ☐ 10. Benchmark location and elevation are within 50 to 75 feet of system components
- ☐ 11. Limit of unsuitable material excavation (if required) shown on plan and remove/replace calculation provided
- ☐ 12. Groundwater table adjustment calculations, when applicable
- ☐ 13. Hydraulic profile of the system provided on plan
- ☐ 14. Details of elements of system (septic tank, leaching facility, d-box, vent, cleanout, etc.)



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- ☐ 15. Slope breakout calculations and liner location and elevations on plan (when applicable)
- ☐ 16. Existing and proposed contours
- ☐ 17. Calculations for pump sizing and 24 hour emergency storage (when applicable)
- ☐ 18. Note identifying location of project relative to the flood plain/flood zone (Zone AE, V, etc.)
- ☐ 19. Does this plan requires a variance or local upgrade approval?
- |  |            |           |
|--|------------|-----------|
| Yes: _____                                       | No: _____  |           |
| if yes, has Form 9A been submitted: _____        | Yes: _____ | No: _____ |
| if yes, have they been identified on plan: _____ | Yes: _____ | No: _____ |
- ☐ 20. Prominent note on plan indicating installer to be certified by XX manufacturer (Infiltrator, etc.)
- ☐ 21. Four copies of plan submitted as part of application package
- ☐ 22. Buoyancy calculations provided (when applicable)
- ☐ 23. Note (If applicable) stating: If electrical work is needed, electrical work must be done by a licensed electrician, who must receive a permit and have work inspected and approved by the town wiring inspector
- ☐ 24. Designer's seal and signature
- ☐ 25. Floor plan provided
- ☐ 26. Locus
- ☐ 27. North Arrow
- ☐ 28. Setbacks (per 15.211) labeled with distances on plan
- ☐ 29. Sensitive receptors reviewed, identified and setback distances labeled (examples provided below)
- |         |                          |
|---------|--------------------------|
| Zone I  | Public water supply well |
| Zone II | Wetlands and buffer      |
| Zone A  | Vernal Pools             |
| IWPA    |                          |
- ☐ 30. Private wells identified (verified in field and/or Board of Health private well list) and setbacks distance meets BOH regulation
- ☐ 31. If a size reduction is requested, no more than the maximum allowable reduction is requested



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- ☐ 32. Needs deed restriction  
Yes: \_\_\_\_\_ No: \_\_\_\_\_  
☐ If yes, there is a prominent note on plan indicating such
- ☐ 33. Needs operation and maintenance contract  
Yes: \_\_\_\_\_ No: \_\_\_\_\_  
☐ If yes, there is a prominent note on plan indicating such
- ☐ 34. If a reduction in the system size is taken as allowed in "Standard Conditions for Alternative Soil Absorption Systems with General Use Certification and/or Approval for Remedial Use," then the plan must clearly indicate an area for a full sized conventional primary SAS and full sized conventional reserve area for new construction OR full sized primary SAS for a repair that are for the sole purpose of on-site sewage disposal.
- ☐ 35. If the minimum property line setbacks are not met, the plan shall include the adjacent septic system
- ☐ 36. All easements identified on the plan



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## AS BUILT PLAN REVIEW CHECKLIST FOR ENGINEER/SANITARIAN SUBMITTALS

**\*\* Note that the following checklist is not necessarily the only information provided on an as built plan but is to serve as a guide. This list will be updated as necessary by the BOH. A completed copy of this checklist shall be submitted with each as built plan.**

Designer: \_\_\_\_\_

Phone #: \_\_\_\_\_

Fax#: \_\_\_\_\_

Email address: \_\_\_\_\_

Date submitted: \_\_\_\_\_

Applicant Name: \_\_\_\_\_

Applicant phone #: \_\_\_\_\_

Address of septic system: \_\_\_\_\_

Installer: \_\_\_\_\_

- |    |  |    |  |
|----|--|----|--|
| 1  | <input type="checkbox"/> PE or PLS stamp                             | 13 | <input type="checkbox"/> inspection port(s)  |
| 2  | <input type="checkbox"/> Signed/stamped Certification                | 14 | <input type="checkbox"/> Reserve area (New construction)                                       |
| 3  | <input type="checkbox"/> North arrow                                 | 15 | <input type="checkbox"/> Poly barrier shown if applicable<br>and top/bottom elevation provided |
| 4  | <input type="checkbox"/> Bar scale                                   | 16 | <input type="checkbox"/> Venting (if required)   |
| 5  | <input type="checkbox"/> As built ties                               | 17 | <input type="checkbox"/> Setbacks identified   |
| 6  | <input type="checkbox"/> Septic tank in elevation                    | a  | <input type="checkbox"/> Components to foundation  |
| 7  | <input type="checkbox"/> Septic tank out elevation                   | b  | <input type="checkbox"/> Components to property line   |
| 8  | <input type="checkbox"/> Zabel filter installed                      | c  | <input type="checkbox"/> water line  |
| 9  | <input type="checkbox"/> If pump chamber used:                       | d  | <input type="checkbox"/> surface water supply/tributary  |
| a  | <input type="checkbox"/> Pump chamber in elevation                   | e  | <input type="checkbox"/> wetlands  |
| b  | <input type="checkbox"/> Pump chamber out elevation                  | f  | <input type="checkbox"/> private wells   |
| 10 | <input type="checkbox"/> d-box in elevation                          | g  | <input type="checkbox"/> surface water   |
| 11 | <input type="checkbox"/> d-box out elevation                         | 18 | <input type="checkbox"/> All easements identified  |
| 12 | <input type="checkbox"/> final cover and/or spot grades as necessary |    |  |