

Technology and Ideas to Modernize Septic Programs for Health Departments

Scott Morris, REHS

Director of Outdoor Environmental Health

Disclaimer

The views expressed are those of the presenter and do not necessarily represent the official position of the Licking County Health Department of any other agency or organization.

Agenda

1. List of questions to gauge audience
2. Take you through where we started to where we are now
3. Implementation of digital inspection reports and automatic emails
4. GIS/Location features of systems in the county
5. "Customer" satisfaction surveys
6. Increased efficiencies
7. Questions

Instructions

Place a pin where you're located



What does your department use for your septic program?

0



All Paper

0



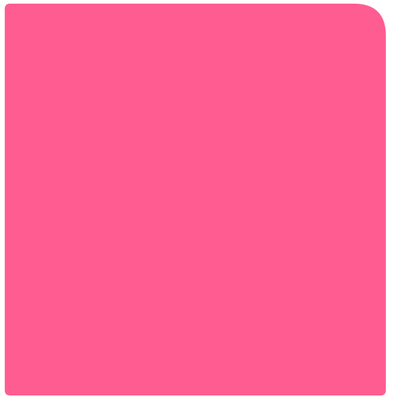
All Digital

0



Mix of paper and digital

0



N/A

Does your department utilize GIS to track septic locations?



What softwares or programs does your department utilize?

Do you provide the septic installer and homeowner with an inspection report?



What is one thing that you feel that takes up too much time in a septic program?

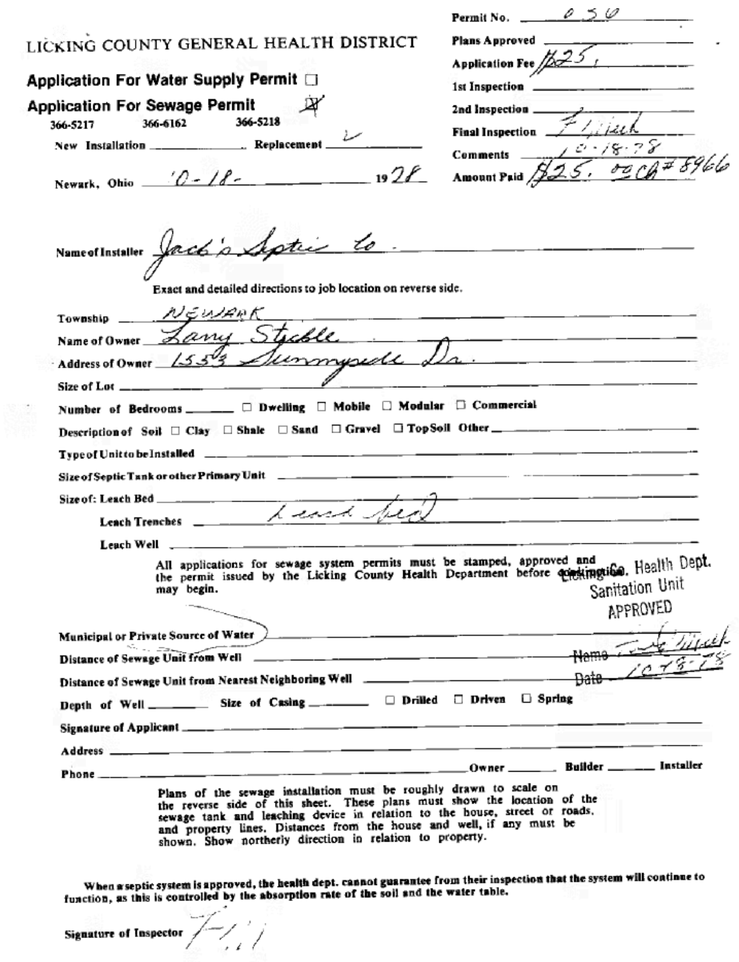
How many individual septic systems are in your jurisdiction?

How many septic systems do you think are in Licking County?

0-10,000	10,000-20,000	20,000-30,000	30,000 +
0 ✗	0 ✗	0 ✗	0 ✓



- Our office has been using Fulcrum since the beginning of 2023
- Fulcrum is a mobile-first, field based data collection and inspection app designed to streamline workflows with a heavy emphasis on geolocation
- We've essentially tried to create a septic/water well super app for permit reviews, inspections, site reviews, O&M, locations, etc.
- We bring iPad's with cellular capability in the field. Fulcrum is built to replace paper & pencil mindset
- Much cleaner. Less of a hassle. I was always concerned for lost permit paperwork/disorganization.
- GIS tracking allows precise location data for each property in your jurisdiction
- GIS data is so valuable and will continue to be



LICKING COUNTY GENERAL HEALTH DISTRICT

Application For Water Supply Permit ☐

Application For Sewage Permit ☒

366-5217 366-6162 366-5218

New Installation ____ Replacement ✓

Newark, Ohio 10-18- ____ 1978

Permit No. 030

Plans Approved ____

Application Fee #25.

1st Inspection ____

2nd Inspection ____

Final Inspection Filed

Comments 10-18-78

Amount Paid #25. 00 CA #8966

Name of Installer Jack's Septic Co.

Exact and detailed directions to job location on reverse side.

Township NEWARK

Name of Owner Larry Stable

Address of Owner 1553 Hummyside Dr.

Size of Lot ____

Number of Bedrooms ____ ☐ Dwelling ☐ Mobile ☐ Modular ☐ Commercial

Description of Soil ☐ Clay ☐ Shale ☐ Sand ☐ Gravel ☐ Top Soil Other ____

Type of Unit to be Installed ____

Size of Septic Tank or other Primary Unit ____

Size of: Leach Bed ____

Leach Trenches Leach Bed

Leach Well ____

All applications for sewage system permits must be stamped, approved and the permit issued by the Licking County Health Department before construction may begin.

Licking Co. Health Dept.
Sanitation Unit
APPROVED
Name [illegible]
Date 10-18-78

Municipal or Private Source of Water ____

Distance of Sewage Unit from Well ____

Distance of Sewage Unit from Nearest Neighboring Well ____

Depth of Well ____ Size of Casing ____ ☐ Drilled ☐ Driven ☐ Spring

Signature of Applicant ____

Address ____

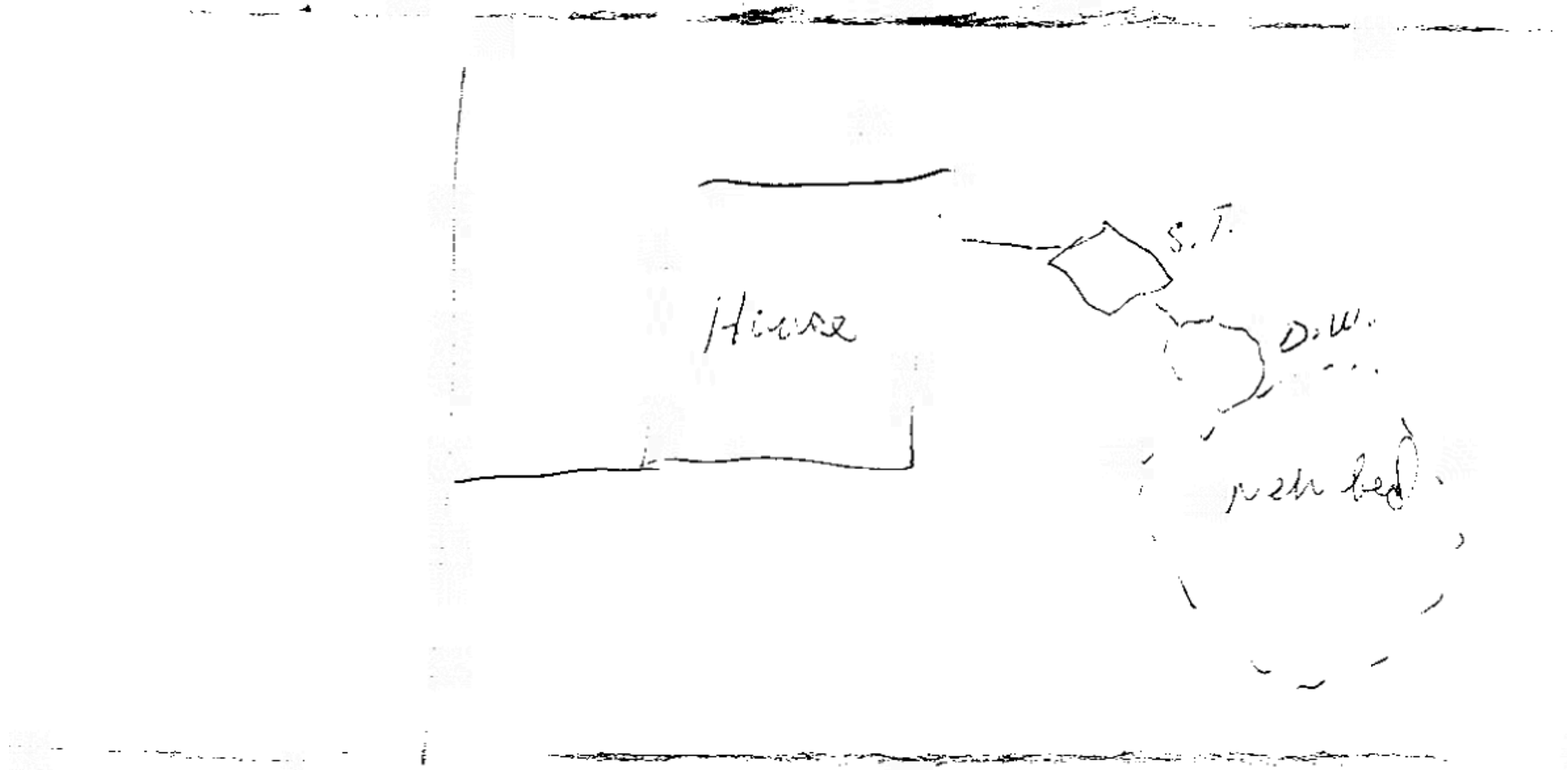
Phone ____ Owner ____ Builder ____ Installer

Plans of the sewage installation must be roughly drawn to scale on the reverse side of this sheet. These plans must show the location of the sewage tank and leaching device in relation to the house, street or roads, and property lines. Distances from the house and well, if any must be shown. Show northerly direction in relation to property.

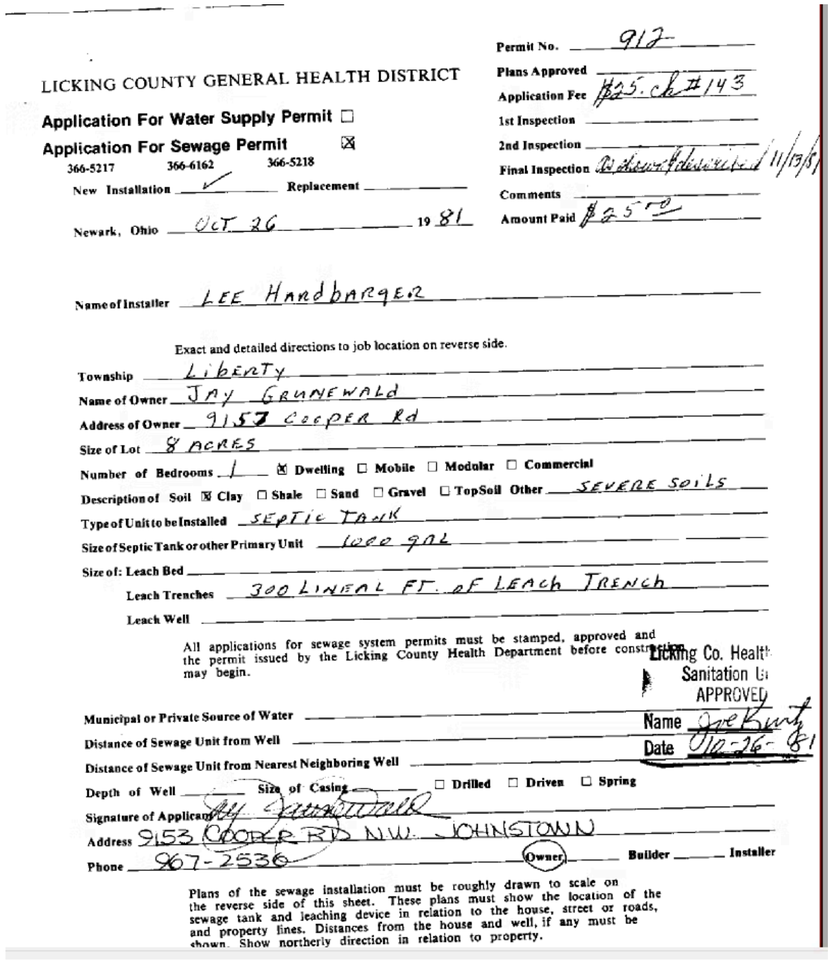
When a septic system is approved, the health dept. cannot guarantee from their inspection that the system will continue to function, as this is controlled by the absorption rate of the soil and the water table.

Signature of Inspector [illegible]

1970's - $25 for a permit...No other information besides leach bed



1970's - Is this to scale?



LICKING COUNTY GENERAL HEALTH DISTRICT

Application For Water Supply Permit ☐

Application For Sewage Permit ☒

366-5217 366-6162 366-5218

New Installation ✓ Replacement ____

Newark, Ohio OCT 26 19 81

Permit No. 912

Plans Approved ____

Application Fee #25. ck #143

1st Inspection ____

2nd Inspection ____

Final Inspection Satisfactorily Completed 11/13/81

Comments ____

Amount Paid #25.00

Name of Installer LEE Handbarger

Exact and detailed directions to job location on reverse side.

Township LIBERTY

Name of Owner JAY GRUNEWALD

Address of Owner 9153 Cooper Rd

Size of Lot 8 ACRES

Number of Bedrooms 1 ☒ Dwelling ☐ Mobile ☐ Modular ☐ Commercial

Description of Soil ☒ Clay ☐ Shale ☐ Sand ☐ Gravel ☐ TopSoil Other SEVERE SOILS

Type of Unit to be Installed SEPTIC TANK

Size of Septic Tank or other Primary Unit 1000 GAL

Size of: Leach Bed ____

Leach Trenches 300 LINEAL FT. of LEACH TRENCH

Leach Well ____

All applications for sewage system permits must be stamped, approved and the permit issued by the Licking County Health Department before construction may begin.

Licking Co. Health
Sanitation
APPROVED
Name Joe Hunt
Date 10-26-81

Municipal or Private Source of Water ____

Distance of Sewage Unit from Well ____

Distance of Sewage Unit from Nearest Neighboring Well ____

Depth of Well ____ Size of Casing ____ ☐ Drilled ☐ Driven ☐ Spring

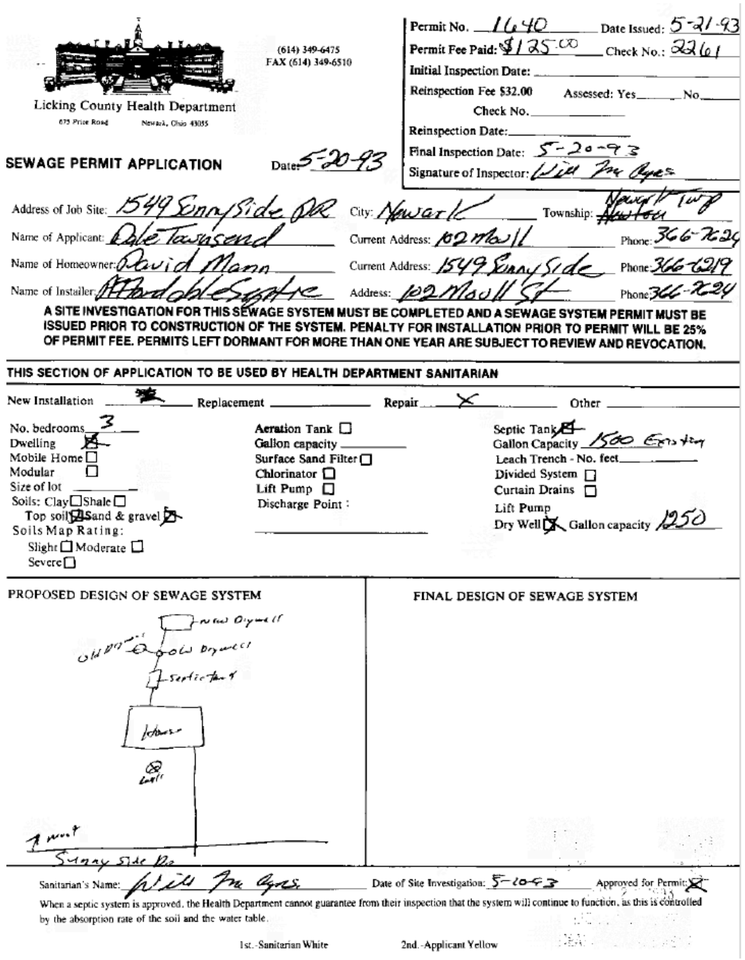
Signature of Applicant Jay Grunewald

Address 9153 COOPER RD N.W. JOHNSTOWN

Phone 967-2536 (Owner) Builder ____ Installer

Plans of the sewage installation must be roughly drawn to scale on the reverse side of this sheet. These plans must show the location of the sewage tank and leaching device in relation to the house, street or roads, and property lines. Distances from the house and well, if any must be shown. Show northerly direction in relation to property.

1980's - Not much changed...perhaps a little more detail



Licking County Health Department
675 Price Road Newark, Ohio 43055
(614) 349-6475
FAX (614) 349-6510

Permit No. 1640 Date Issued: 5-21-93
Permit Fee Paid: $125.00 Check No.: 22161
Initial Inspection Date:
Reinspection Fee $32.00 Assessed: Yes No
Check No.
Reinspection Date:
Final Inspection Date: 5-20-93
Signature of Inspector: Will Jim Ayers

SEWAGE PERMIT APPLICATION Date: 5-20-93

Address of Job Site: 1549 Sunnyside DR City: Newark Township: Newark Twp Newton
Name of Applicant: Dale Townsend Current Address: 102 Mowll Phone: 366-7229
Name of Homeowner: David Mann Current Address: 1549 Sunnyside Phone: 366-6319
Name of Installer: Randall Sextro Address: 102 Mowll St Phone: 366-7229

A SITE INVESTIGATION FOR THIS SEWAGE SYSTEM MUST BE COMPLETED AND A SEWAGE SYSTEM PERMIT MUST BE ISSUED PRIOR TO CONSTRUCTION OF THE SYSTEM. PENALTY FOR INSTALLATION PRIOR TO PERMIT WILL BE 25% OF PERMIT FEE. PERMITS LEFT DORMANT FOR MORE THAN ONE YEAR ARE SUBJECT TO REVIEW AND REVOCATION.

THIS SECTION OF APPLICATION TO BE USED BY HEALTH DEPARTMENT SANITARIAN

New Installation Replacement Repair X Other

No. bedrooms 3
Dwelling X
Mobile Home ☐
Modular ☐
Size of lot
Soils: Clay ☐ Shale ☐
Top soil ☐ Sand & gravel X
Soils Map Rating:
Slight ☐ Moderate ☐
Severe ☐

Aeration Tank ☐
Gallon capacity
Surface Sand Filter ☐
Chlorinator ☐
Lift Pump ☐
Discharge Point :

Septic Tank X
Gallon Capacity 1500 Existing
Leach Trench - No. feet
Divided System ☐
Curtain Drains ☐
Lift Pump
Dry Well X Gallon capacity 1250

PROPOSED DESIGN OF SEWAGE SYSTEM

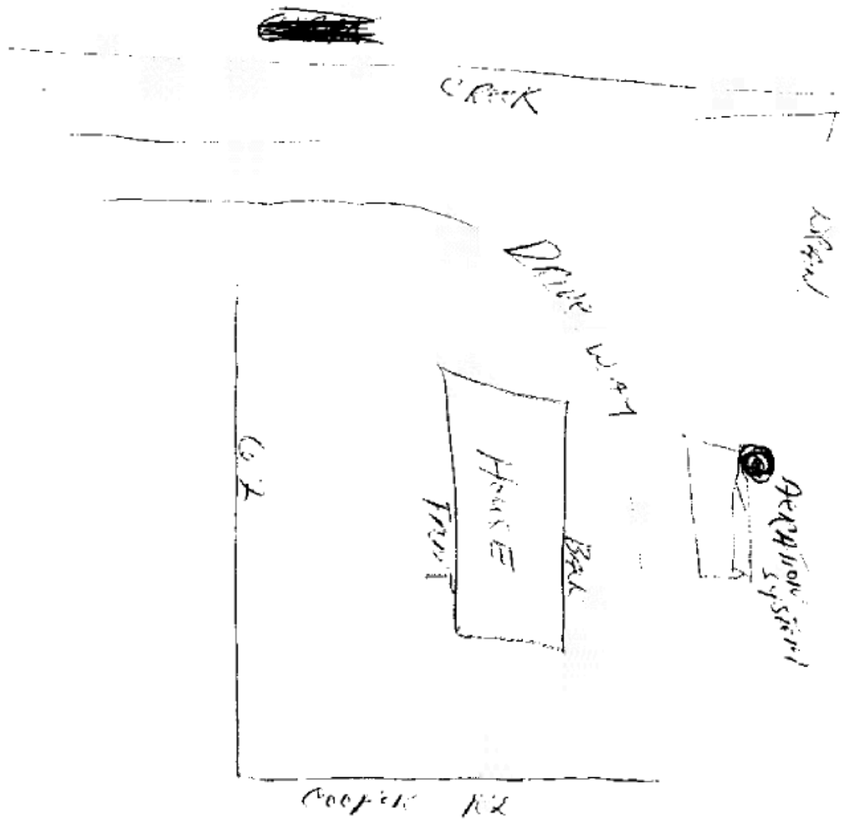
FINAL DESIGN OF SEWAGE SYSTEM

Sanitarian's Name: Will Jim Ayers Date of Site Investigation: 5-20-93 Approved for Permit: X

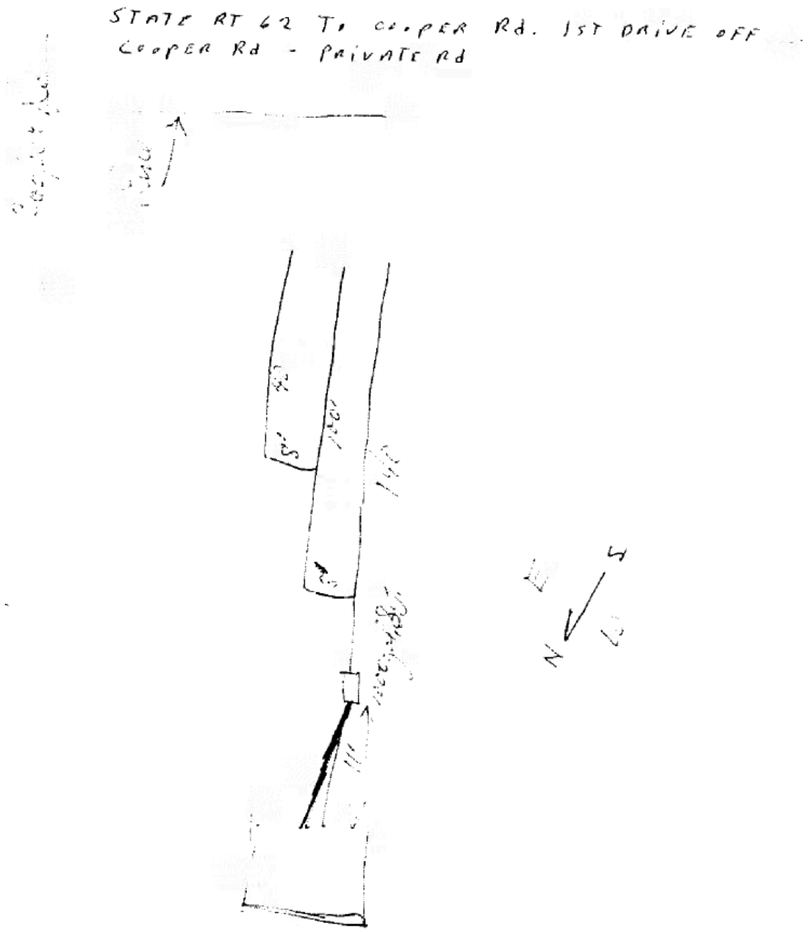
When a septic system is approved, the Health Department cannot guarantee from their inspection that the system will continue to function, as this is controlled by the absorption rate of the soil and the water table.

1st.-Sanitarian White 2nd.-Applicant Yellow

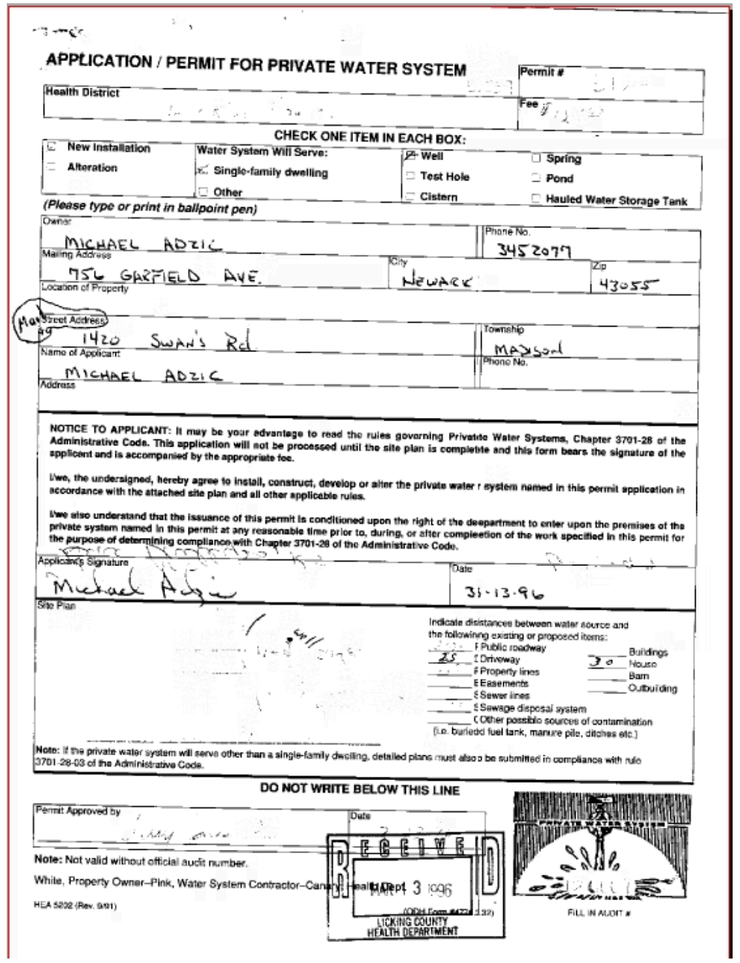
1990's - More details, a better drawing...$125 for a permit



1970's - 1990's



1970's-1990's - Check out the address...at least they gave us cardinal directions



APPLICATION / PERMIT FOR PRIVATE WATER SYSTEM

Permit #

Health District

Fee

CHECK ONE ITEM IN EACH BOX:

☐ New Installation
☐ Alteration

Water System Will Serve:
☒ Single-family dwelling
☐ Other

☒ Well
☐ Test Hole
☐ Cistern
☐ Spring
☐ Pond
☐ Hauled Water Storage Tank

(Please type or print in ballpoint pen)

Owner: MICHAEL ADZIC
Phone No.: 345 2079

Mailing Address: 756 GARFIELD AVE.
City: NEWARK
Zip: 43055

Location of Property
Street Address: 1420 SWAN'S Rd
Township: MADISON

Name of Applicant: MICHAEL ADZIC
Phone No.:

Address

NOTICE TO APPLICANT: It may be your advantage to read the rules governing Privatte Water Systems, Chapter 3701-28 of the Administrative Code. This application will not be processed until the site plan is complete and this form bears the signature of the applicant and is accompanied by the appropriate fee.

I/we, the undersigned, hereby agree to install, construct, develop or alter the private water r system named in this permit application in accordance with the attached site plan and all other applicable rules.

I/we 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 Administrative Code.

Applicant's Signature: Michael Adzic
Date: 31-13-96

Site Plan

Indicate distances between water source and the following existing or proposed items:

25 F Public roadway
F Driveway
F Property lines
E Easements
S Sewer lines
S Sewage disposal system
C Other possible sources of contamination (i.e. buriedd fuel tank, manure pile, ditches etc.)

30 Buildings
House
Barn
Outbuilding

Note: If the private water system will serve other than a single-family dwelling, detailed plans must also be submitted in compliance with rule 3701-28-03 of the Administrative Code.

DO NOT WRITE BELOW THIS LINE

Permit Approved by

Date

RECEIVED
MAR 1 3 1996
LICKING COUNTY HEALTH DEPARTMENT

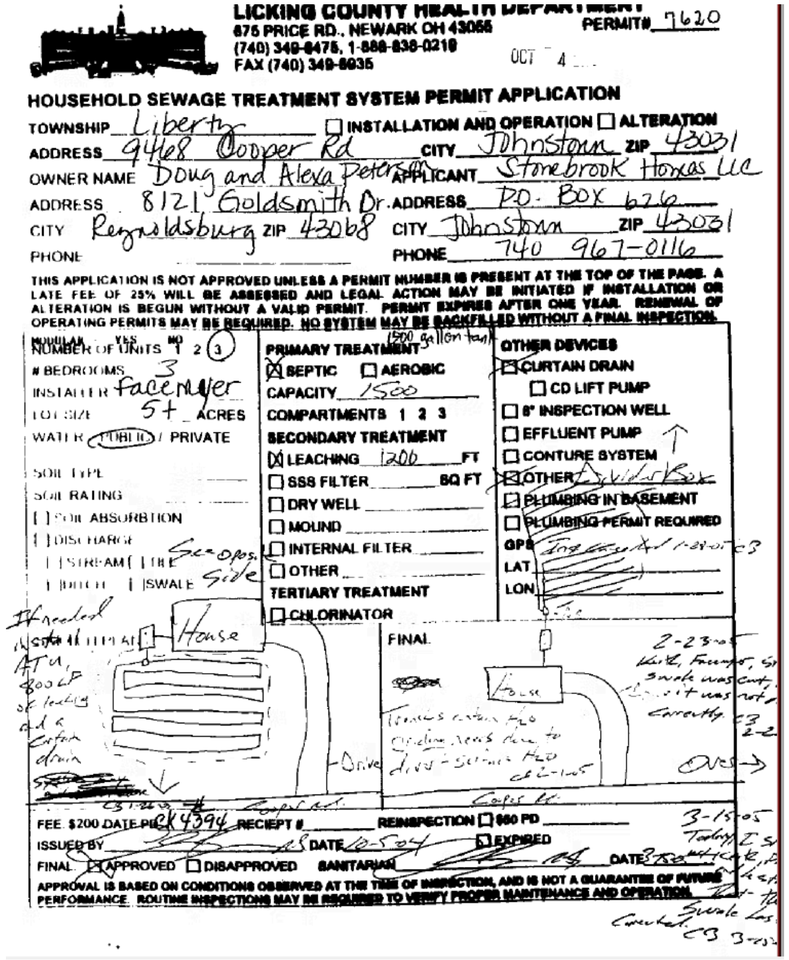
FILL IN AUDIT #

Note: Not valid without official audit number.

White, Property Owner--Pink, Water System Contractor--Canary, Health Dept.

HEA 5232 (Rev. 9/91)

1990's - Well Permit Example...No inspection notes



LICKING COUNTY HEALTH DEPARTMENT
675 PRICE RD., NEWARK OH 43055
(740) 349-6475, 1-888-838-0219
FAX (740) 349-6035
PERMIT# 7620
OCT 4

HOUSEHOLD SEWAGE TREATMENT SYSTEM PERMIT APPLICATION

TOWNSHIP Liberty ☐ INSTALLATION AND OPERATION ☐ ALTERATION
ADDRESS 9468 Cooper Rd CITY Johnstown ZIP 43031
OWNER NAME Doug and Alexa Petersen APPLICANT Stonebrook Homes LLC
ADDRESS 8121 Goldsmith Dr. ADDRESS P.O. Box 626
CITY Reynoldsburg ZIP 43068 CITY Johnstown ZIP 43031
PHONE PHONE 740 967-0116

THIS APPLICATION IS NOT APPROVED UNLESS A PERMIT NUMBER IS PRESENT AT THE TOP OF THE PAGE. A LATE FEE OF 25% WILL BE ASSESSED AND LEGAL ACTION MAY BE INITIATED IF INSTALLATION OR ALTERATION IS BEGUN WITHOUT A VALID PERMIT. PERMIT EXPIRES AFTER ONE YEAR. RENEWAL OF OPERATING PERMITS MAY BE REQUIRED. NO SYSTEM MAY BE BACKFILLED WITHOUT A FINAL INSPECTION.

MODULAR YES NO
NUMBER OF UNITS 1 2 (3)
BEDROOMS 3
INSTALLER Facemyer
LOT SIZE 5+ ACRES
WATER (PUBLIC) / PRIVATE
SOIL TYPE
SOIL RATING
[ ] SOIL ABSORBTION
[ ] DISCHARGE
[ ] STREAM [ ] TILE
[ ] DITCH [ ] SWALE Side

PRIMARY TREATMENT
[X] SEPTIC ☐ AEROBIC
CAPACITY 1500
COMPARTMENTS 1 2 3
SECONDARY TREATMENT
[X] LEACHING 1200 FT
☐ SSS FILTER ____ SQ FT
☐ DRY WELL
☐ MOUND
☐ INTERNAL FILTER
☐ OTHER
TERTIARY TREATMENT
☐ CHLORINATOR

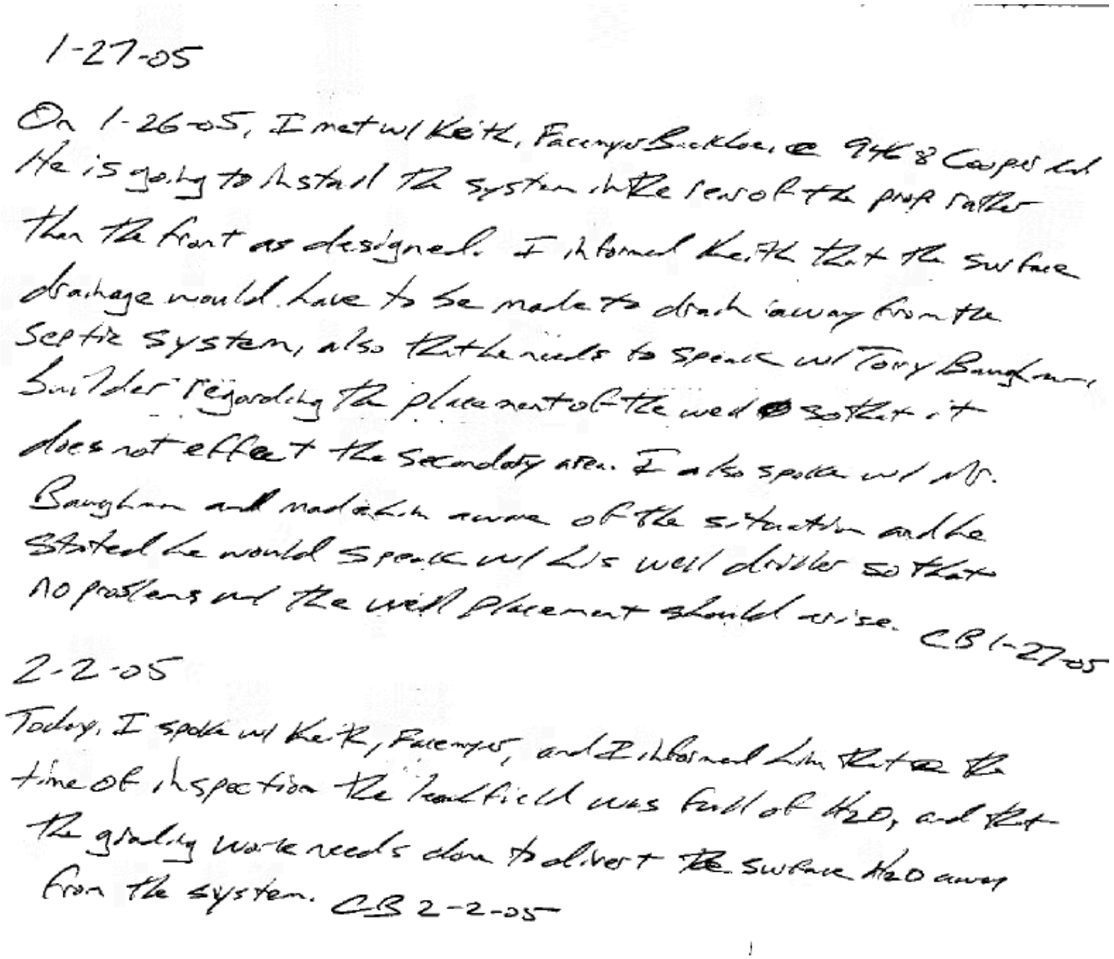
OTHER DEVICES
☐ CURTAIN DRAIN
☐ CD LIFT PUMP
☐ 8" INSPECTION WELL
☐ EFFLUENT PUMP
☐ CONTURE SYSTEM
☐ OTHER
☐ PLUMBING IN BASEMENT
☐ PLUMBING PERMIT REQUIRED
GPS
LAT
LON

House
Drive
FINAL
House

FEE $200 DATE PD CK 4394 RECIEPT # ____ REINSPECTION ☐ $60 PD ____
ISSUED BY DATE 12-5-04 ☐ EXPIRED
FINAL [X] APPROVED ☐ DISAPPROVED SANITARIAN DATE

APPROVAL IS BASED ON CONDITIONS OBSERVED AT THE TIME OF INSPECTION, AND IS NOT A GUARANTEE OF FUTURE PERFORMANCE. ROUTINE INSPECTIONS MAY BE REQUIRED TO VERIFY PROPER MAINTENANCE AND OPERATION.

Early 2000's - Can you read those inspection notes?



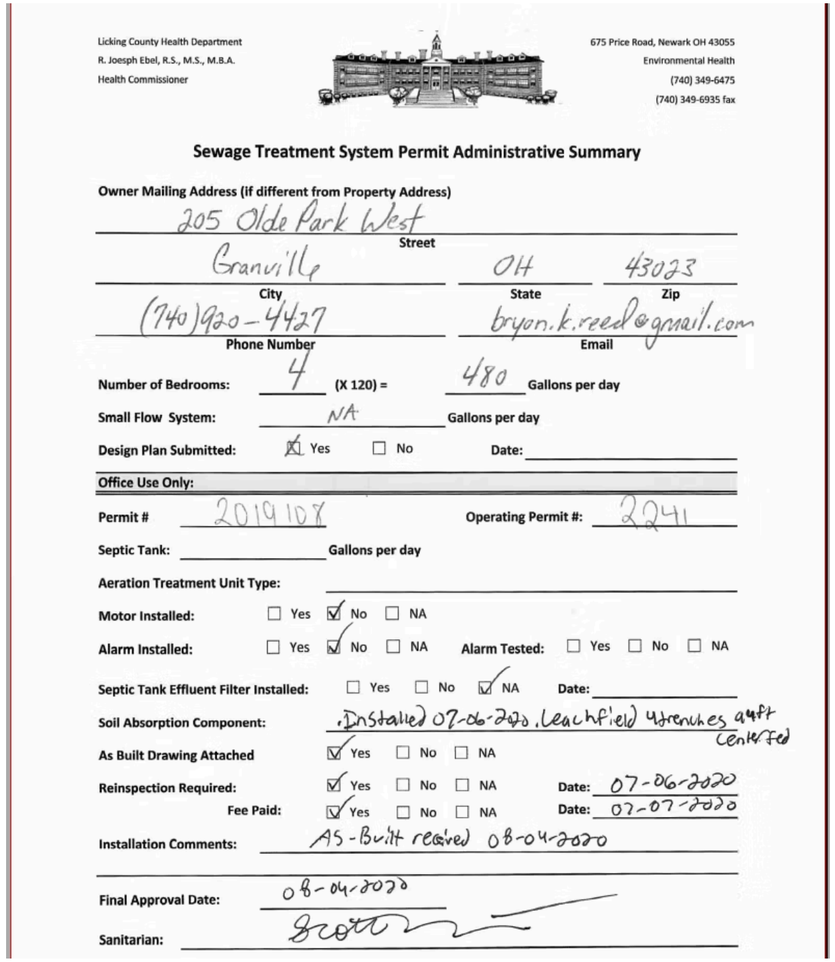
1-27-05

On 1-26-05, I met w/ Keith, Pacemyer Backhoe @ 94 & Cooper Rd. He is going to install the system in the rear of the PNR rather than the front as designed. I informed Keith that the surface drainage would have to be made to drain away from the septic system, also that he needs to speak w/ Tony Baughman, Builder regarding the placement of the well so that it does not effect the secondary area. I also spoke w/ Mr. Baughman and made him aware of the situation and he stated he would speak w/ his well driller so that no problems w/ the well placement should arise. CB 1-27-05

2-2-05

Today, I spoke w/ Keith, Pacemyer, and informed him that at the time of inspection the leachfield was full of H_2O, and that the grading work needs done to divert the surface H_2O away from the system. CB 2-2-05

2000's Inspection Notes - Written on back of permit



Licking County Health Department
R. Joesph Ebel, R.S., M.S., M.B.A.
Health Commissioner

675 Price Road, Newark OH 43055
Environmental Health
(740) 349-6475
(740) 349-6935 fax

Sewage Treatment System Permit Administrative Summary

Owner Mailing Address (if different from Property Address)

205 Olde Park West
Street

Granville | OH | 43023
City | State | Zip

(740)920-4427 | bryon.k.reed@gmail.com
Phone Number | Email

Number of Bedrooms: 4 (X 120) = 480 Gallons per day

Small Flow System: NA Gallons per day

Design Plan Submitted: ☒ Yes ☐ No **Date:**

Office Use Only:

Permit # 2019108 **Operating Permit #:** 2241

Septic Tank: Gallons per day

Aeration Treatment Unit Type:

Motor Installed: ☐ Yes ☑ No ☐ NA

Alarm Installed: ☐ Yes ☑ No ☐ NA **Alarm Tested:** ☐ Yes ☐ No ☐ NA

Septic Tank Effluent Filter Installed: ☐ Yes ☐ No ☑ NA **Date:**

Soil Absorption Component: Installed 07-06-2020. Leachfield 4 trenches 94ft centered

As Built Drawing Attached ☑ Yes ☐ No ☐ NA

Reinspection Required: ☑ Yes ☐ No ☐ NA **Date:** 07-06-2020

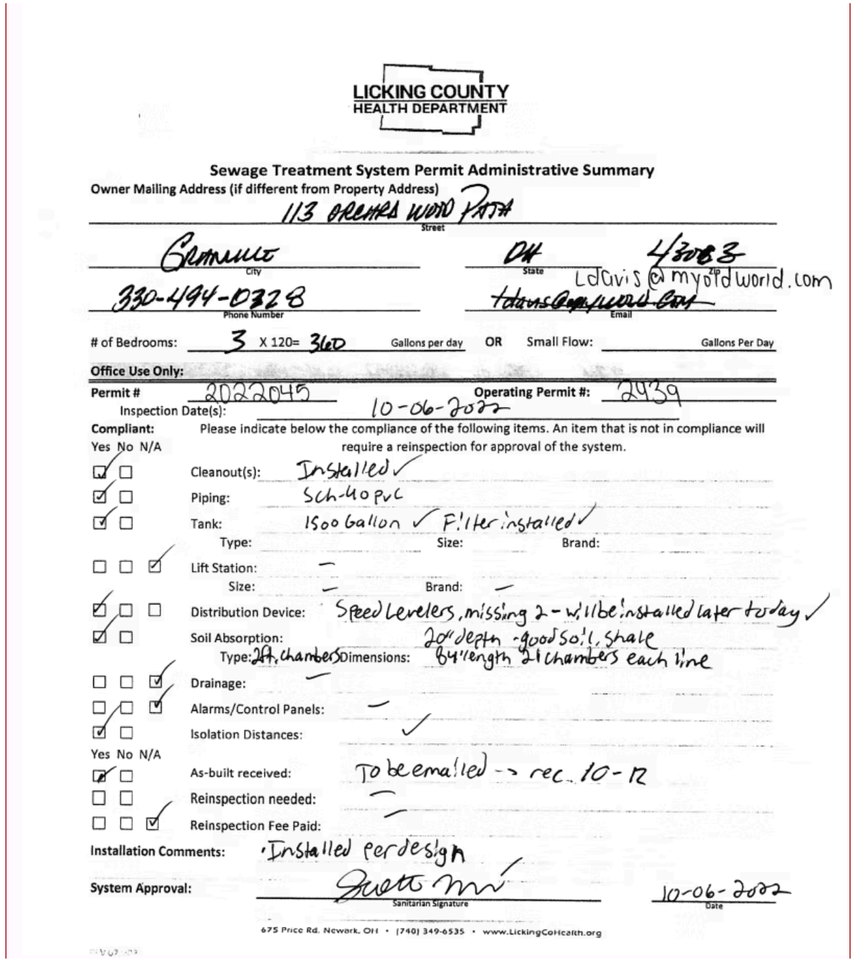
Fee Paid: ☑ Yes ☐ No ☐ NA **Date:** 07-07-2020

Installation Comments: AS-Built recived 08-04-2020

Final Approval Date: 08-04-2020

Sanitarian: Scott

2000's - 2021 Integration of inspection checkboxes



LICKING COUNTY
HEALTH DEPARTMENT

Sewage Treatment System Permit Administrative Summary

Owner Mailing Address (if different from Property Address)
113 ORCHARD WOOD PATH
Street
GRANVILLE — City — OH — State — 43023 — Zip
330-494-0328 — Phone Number — LDavis@myoldworld.com — Email

# of Bedrooms: 3 X 120= 360 Gallons per day OR Small Flow: _____ Gallons Per Day

Office Use Only:

Permit # 2022045 **Operating Permit #:** 2439
Inspection Date(s): 10-06-2022

Compliant: Please indicate below the compliance of the following items. An item that is not in compliance will require a reinspection for approval of the system.

Yes	No	N/A		
☑	☐	☐	Cleanout(s):	Installed ✓
☑	☐	☐	Piping:	Sch-40 PVC
☑	☐	☐	Tank:	1500 Gallon ✓ Filter installed ✓
			Type:	Size: Brand:
☐	☐	☑	Lift Station:	—
			Size:	— Brand: —
☑	☐	☐	Distribution Device:	Speed Levelers, missing 2 - will be installed later today ✓
☑	☐		Soil Absorption:	20" depth - good soil, shale
			Type: 24" chambers Dimensions:	64' length 21 chambers each line
☐	☐	☑	Drainage:	—
☐	☐	☑	Alarms/Control Panels:	—
☑	☐		Isolation Distances:	✓

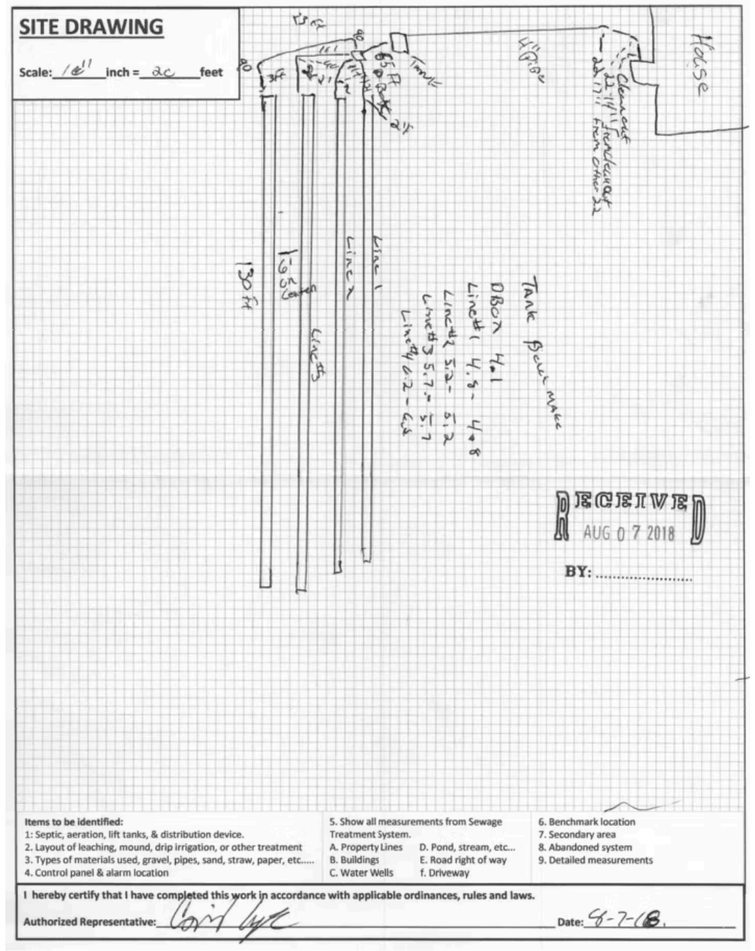
Yes	No	N/A		
☑	☐		As-built received:	To be emailed -> rec. 10-12
☐	☐		Reinspection needed:	—
☐	☐	☑	Reinspection Fee Paid:	—

Installation Comments: Installed per design

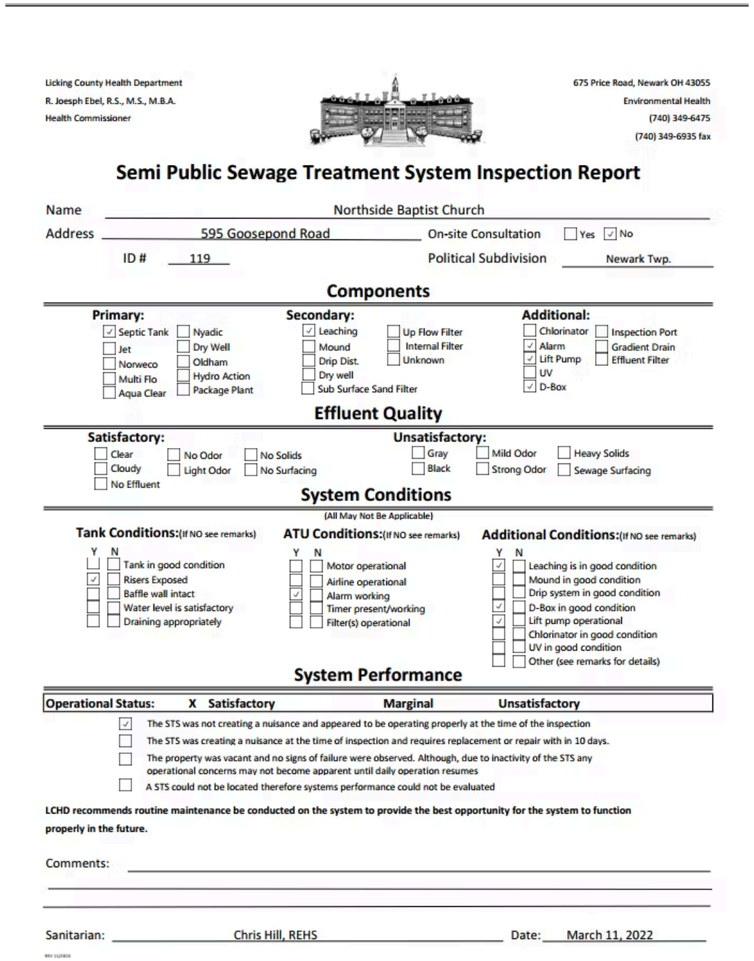
System Approval: _____ 10-06-2022
Sanitarian Signature — Date

675 Price Rd. Newark, OH • (740) 349-6535 • www.LickingCoHealth.org

2022 - Revamped version of checkboxes



As-Built Example



Licking County Health Department
R. Joesph Ebel, R.S., M.S., M.B.A.
Health Commissioner

675 Price Road, Newark OH 43055
Environmental Health
(740) 349-6475
(740) 349-6935 fax

Semi Public Sewage Treatment System Inspection Report

Name: Northside Baptist Church
Address: 595 Goosepond Road — On-site Consultation: ☐ Yes ☑ No
ID #: 119 — Political Subdivision: Newark Twp.

Components

Primary:
- ☑ Septic Tank
- ☐ Jet
- ☐ Norweco
- ☐ Multi Flo
- ☐ Aqua Clear
- ☐ Nyadic
- ☐ Dry Well
- ☐ Oldham
- ☐ Hydro Action
- ☐ Package Plant

Secondary:
- ☑ Leaching
- ☐ Mound
- ☐ Drip Dist.
- ☐ Dry well
- ☐ Sub Surface Sand Filter
- ☐ Up Flow Filter
- ☐ Internal Filter
- ☐ Unknown

Additional:
- ☐ Chlorinator
- ☑ Alarm
- ☑ Lift Pump
- ☐ UV
- ☑ D-Box
- ☐ Inspection Port
- ☐ Gradient Drain
- ☐ Effluent Filter

Effluent Quality

Satisfactory:
- ☐ Clear
- ☐ Cloudy
- ☐ No Effluent
- ☐ No Odor
- ☐ Light Odor
- ☐ No Solids
- ☐ No Surfacing

Unsatisfactory:
- ☐ Gray
- ☐ Black
- ☐ Mild Odor
- ☐ Strong Odor
- ☐ Heavy Solids
- ☐ Sewage Surfacing

System Conditions

(All May Not Be Applicable)

Tank Conditions: (If NO see remarks)	Y	N
Tank in good condition	☐	☐
Risers Exposed	☑	☐
Baffle wall intact	☐	☐
Water level is satisfactory	☐	☐
Draining appropriately	☐	☐

ATU Conditions: (If NO see remarks)	Y	N
Motor operational	☐	☐
Airline operational	☐	☐
Alarm working	☑	☐
Timer present/working	☐	☐
Filter(s) operational	☐	☐

Additional Conditions: (If NO see remarks)	Y	N
Leaching is in good condition	☑	☐
Mound in good condition	☐	☐
Drip system in good condition	☐	☐
D-Box in good condition	☑	☐
Lift pump operational	☑	☐
Chlorinator in good condition	☐	☐
UV in good condition	☐	☐
Other (see remarks for details)	☐	☐

System Performance

Operational Status: X Satisfactory — Marginal — Unsatisfactory

- ☑ The STS was not creating a nuisance and appeared to be operating properly at the time of the inspection
- ☐ The STS was creating a nuisance at the time of inspection and requires replacement or repair with in 10 days.
- ☐ The property was vacant and no signs of failure were observed. Although, due to inactivity of the STS any operational concerns may not become apparent until daily operation resumes
- ☐ A STS could not be located therefore systems performance could not be evaluated

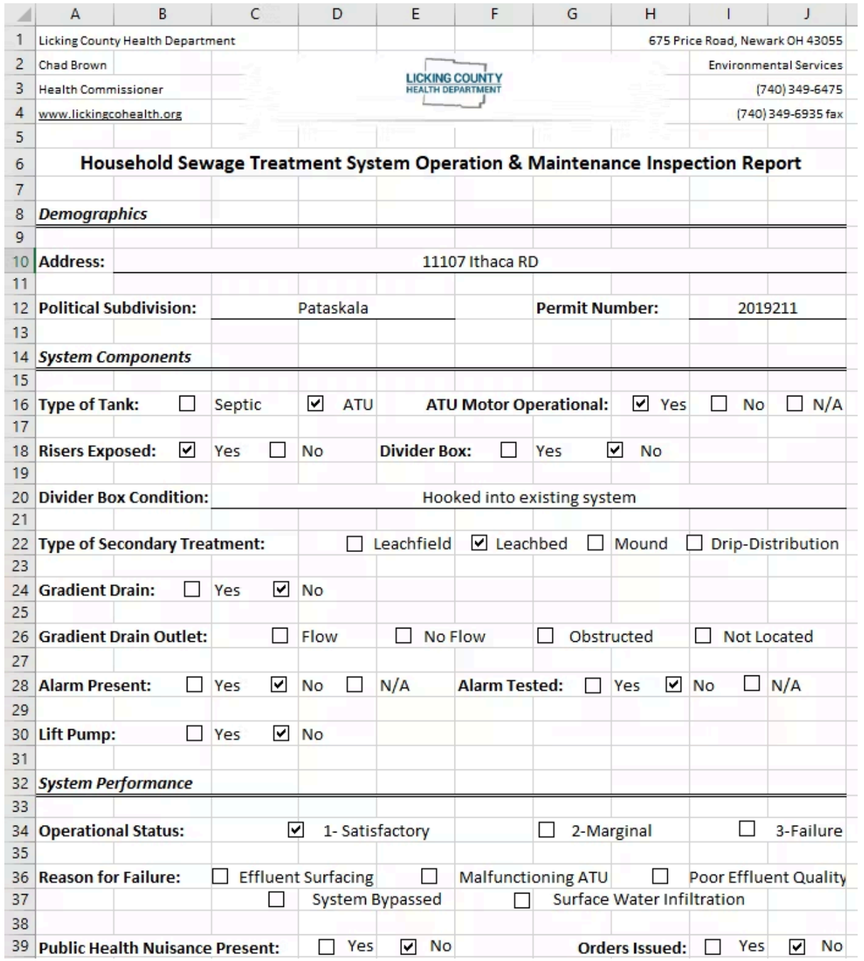
LCHD recommends routine maintenance be conducted on the system to provide the best opportunity for the system to function properly in the future.

Comments:

Sanitarian: Chris Hill, REHS — Date: March 11, 2022

REV 11/2015

Old Semi-Public Inspection Report. Instead of handwritten it was an Excel Spreadsheet. Time Consuming!



Licking County Health Department							675 Price Road, Newark OH 43055		
Chad Brown								Environmental Services	
Health Commissioner								(740) 349-6475	
www.lickingcohealth.org								(740) 349-6935 fax	

Household Sewage Treatment System Operation & Maintenance Inspection Report

Demographics

Address: 11107 Ithaca RD

Political Subdivision: Pataskala **Permit Number:** 2019211

System Components

Type of Tank: ☐ Septic ☑ ATU **ATU Motor Operational:** ☑ Yes ☐ No ☐ N/A

Risers Exposed: ☑ Yes ☐ No **Divider Box:** ☐ Yes ☑ No

Divider Box Condition: Hooked into existing system

Type of Secondary Treatment: ☐ Leachfield ☑ Leachbed ☐ Mound ☐ Drip-Distribution

Gradient Drain: ☐ Yes ☑ No

Gradient Drain Outlet: ☐ Flow ☐ No Flow ☐ Obstructed ☐ Not Located

Alarm Present: ☐ Yes ☑ No ☐ N/A **Alarm Tested:** ☐ Yes ☑ No ☐ N/A

Lift Pump: ☐ Yes ☑ No

System Performance

Operational Status: ☑ 1- Satisfactory ☐ 2-Marginal ☐ 3-Failure

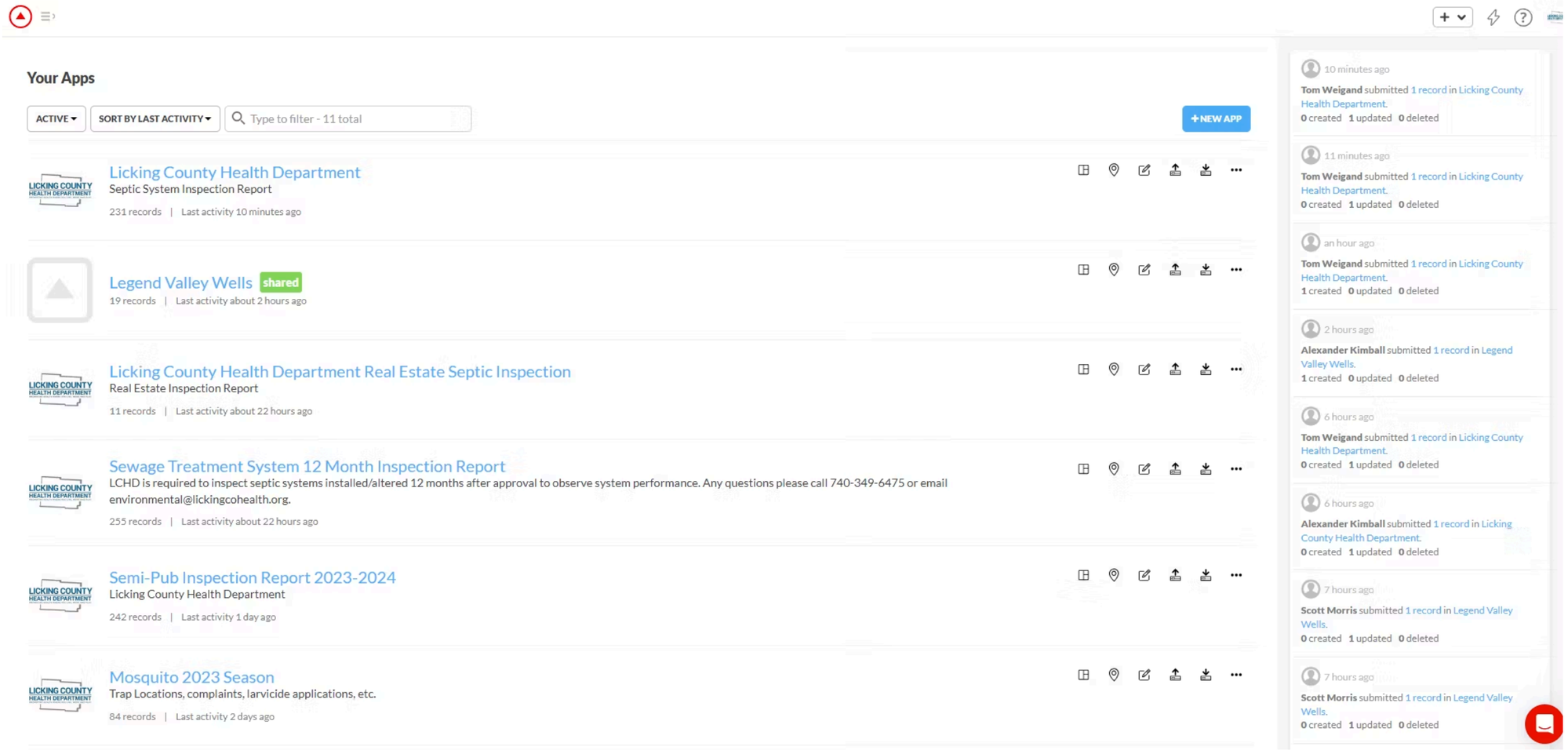
Reason for Failure: ☐ Effluent Surfacing ☐ Malfunctioning ATU ☐ Poor Effluent Quality ☐ System Bypassed ☐ Surface Water Infiltration

Public Health Nuisance Present: ☐ Yes ☑ No **Orders Issued:** ☐ Yes ☑ No

12 Month Inspection Report. Excel. Time Consuming!

Common Themes

1. Handwritten notes/inspection reports…hard to read
2. Nothing to scale. Lack of location information.
3. Everything was paper then scanned then emailed
4. Brough the permit paperwork in the field…ever think it got lost?
5. No photos
6. Lack of important details…what if a bond claim is needed?
7. Inefficient processes/Time consuming
8. Lack of standardization for inspections
9. Disorganization…what was inspected and when?



Current - Cloud/Web Base Fulcrum Dashboard

675 Price Road Newark Licking Ohio 43055 Septic System Inspection Report

Reply | Reply All | Forward

F Fulcrum <no-reply@fulcrumapp.io>
To no-reply@fulcrumapp.io

Tue 8/29/2023 2:39 PM

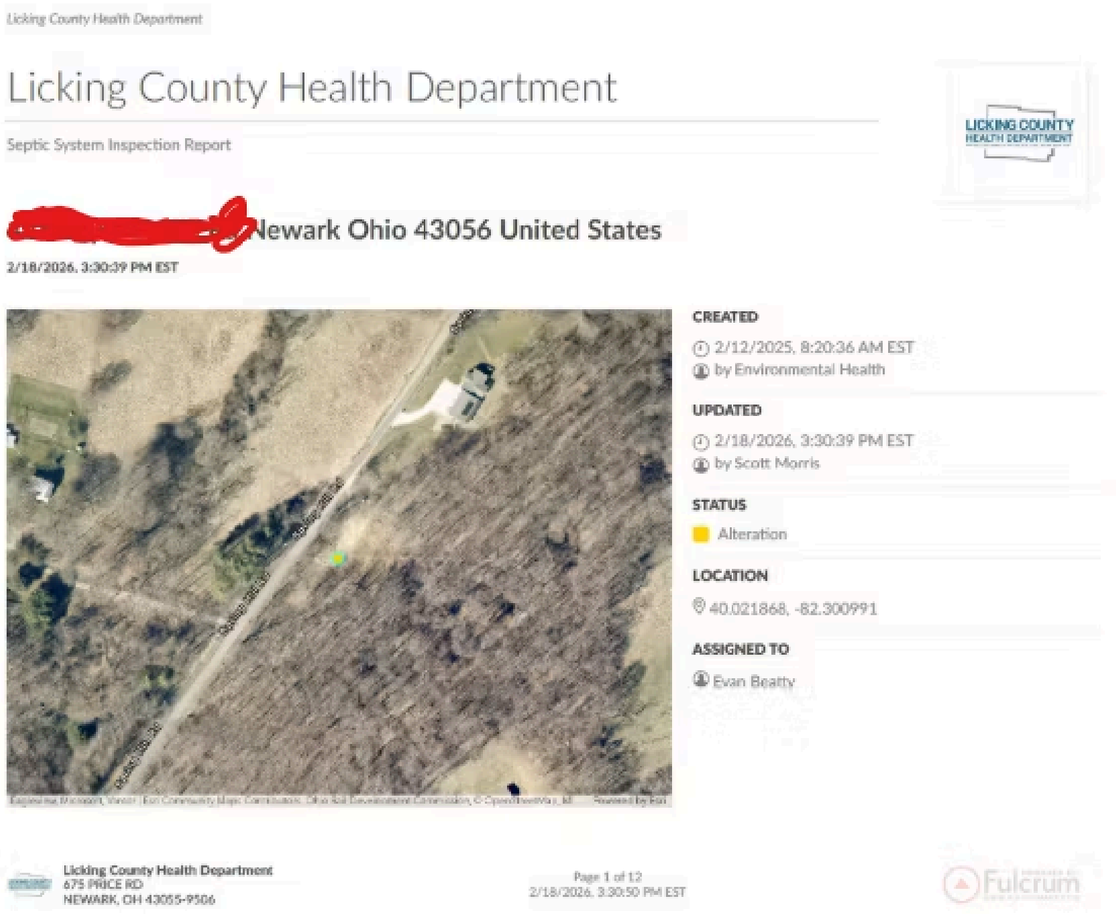
675, Price Road, , Newark, Licking, Ohio, 43055, .pdf
744 KB

Attached is the final inspection report of the septic system completed at 675 Price Road Newark Licking Ohio 43055 on Tue, 29 Aug 2023 by Scott Morris, REHS. If the septic installer has not already, they are required to submit an as-built drawing to our office for final approval of the permit. Please submit within 10 days.

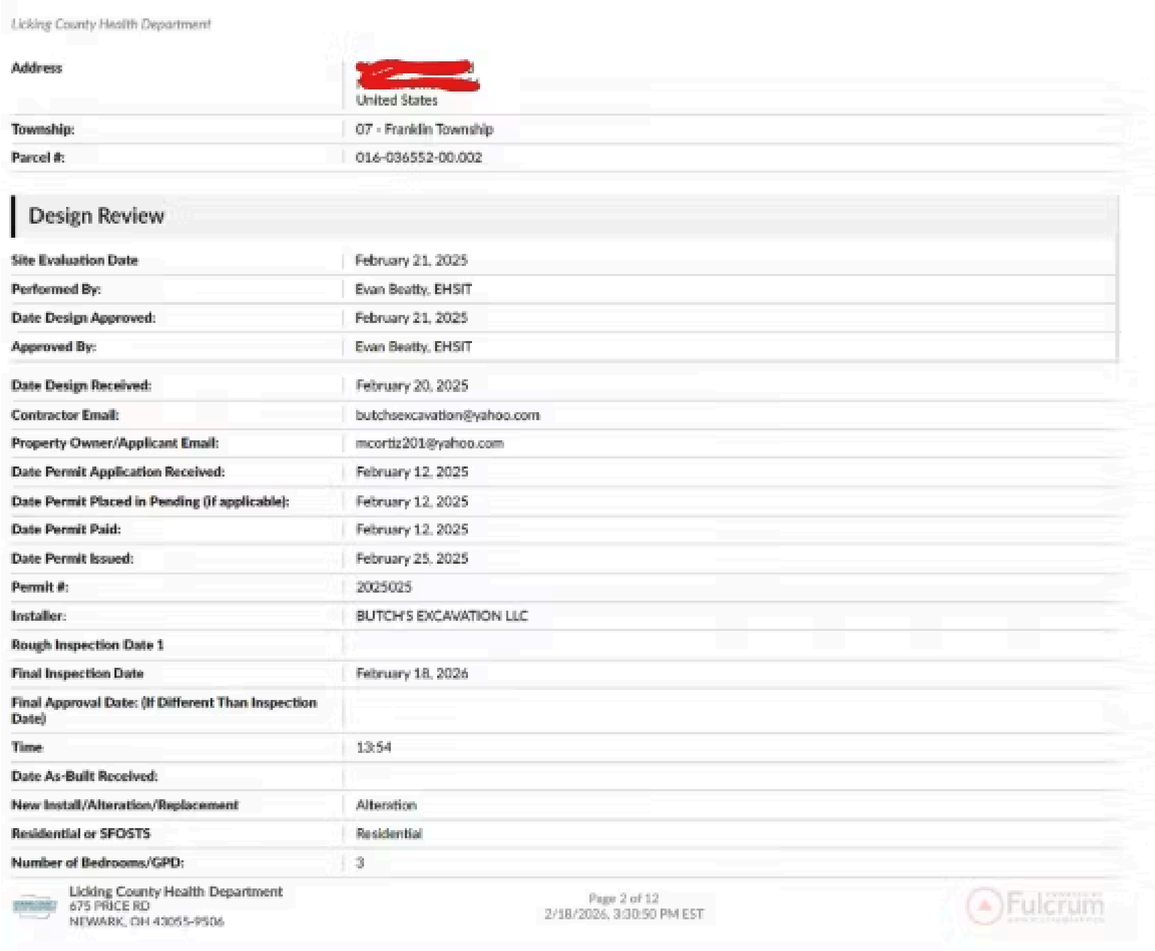
If you have any questions or concerns, please call our office at 740-349-6475 or email environmental@lickingcohealth.org.

Environmental Health Division
Licking County Health Department
675 Price Rd. | Newark, OH | 43055
Office: (740) 349-6475
www.lickingcohealth.org

Current - Auto Email Digital Report to Staff, Homeowner, and Installer



Current Inspection Report - GIS location snapshot



Licking County Health Department

Address	[redacted] United States
Township:	07 - Franklin Township
Parcel #:	016-036552-00.002

Design Review

Site Evaluation Date	February 21, 2025
Performed By:	Evan Beatty, EHSIT
Date Design Approved:	February 21, 2025
Approved By:	Evan Beatty, EHSIT
Date Design Received:	February 20, 2025
Contractor Email:	butchsexcavation@yahoo.com
Property Owner/Applicant Email:	mcortiz201@yahoo.com
Date Permit Application Received:	February 12, 2025
Date Permit Placed in Pending (If applicable):	February 12, 2025
Date Permit Paid:	February 12, 2025
Date Permit Issued:	February 25, 2025
Permit #:	2025025
Installer:	BUTCH'S EXCAVATION LLC
Rough Inspection Date 1	
Final Inspection Date	February 18, 2026
Final Approval Date: (If Different Than Inspection Date)	
Time	13:54
Date As-Built Received:	
New Install/Alteration/Replacement	Alteration
Residential or SFOSTS	Residential
Number of Bedrooms/GPD:	3

Current - Inspection Notes. Organized to know # of inspections.



Licking County Health Department

Type of Septic System	Septic Tank to 18-30" Leach Lines

Inspection Notes

Cleanout Present?	Yes
Cleanout Location on Home (cardinal direction):	S
Additional Cleanouts Needed? (greater than 75' from initial cleanout to tank inlet + greater than 100' after)	No
Cleanout(s) Additional Notes:	Installer stated piping was all 4 inch schedule 40 solid core. Said patio was constructed before they got there. Exit is below footer. Cleanout located underneath patio.
Building Sewer Material:	Sch40
Is Sch40 Building Sewer Solid Core? (ASTM D1785/ASTM D2665/ASTM D2729)	Yes
Tank Make / Distributer:	Hupp/Stiverson
Standard or ATU?:	Standard
Septic Tank Size (gallons):	1500
Effluent Filter Present?	Yes
Additional Tank Notes:	Concrete tank. Tank was backfilled prior to inspection. No issues observed on 02-18-2026 inspection. Risers above ground and appeared secured. Design did not have a replacement tank. This was not communicated to us at all that this change was taking place.
Lift Station Present / Required?	No
Piping After Tank:	SDR35
Additional Piping Notes:	Installer stated that they used 4 inch schedule 40 and tied into existing SDR 35. Flushed toilet during 02-18-2026 inspection. Toilet paper observed stuck on end of pipe but otherwise there was flow. Elevation was shot from basement floor to top of inlet pipe. Roughly 15 inches of fall was measured. This work was not properly inspected before backfill. Installer stated they performed work in summer of 2025. Enforcement letter sent to installer due to no inspection prior to backfill.
Distribution Box/Device Present?	Yes
Distribution Device Type:	Concrete Existing
Distribution Device Additional Notes:	Lid observed broken
Soil Absorption Component Type:	Leachfield

Current - Inspection Notes. We created in depth inspection checklists per system type.

Leachfield Notes:

Leachfield Devices Used?	Existing
Is Leachfield Split? (required if greater than 150')	
Leachfield Dimensions (#Trenches x Length' x Width' x Depth'):	
All Trenches Uniform Length Along Contour?	
Additional Leachfield Notes:	Existing leach field. No high water observed in d box.
Perimeter Drain Present?	
Is There a Sewer/Water Line Crossing?	
Is Sewer Located at least 10' away from Water Supply Line / Water Source? (Except within 5' of Building Foundation)	
All Components Isolation Distance in Feet to Nearest Water Source / Surface Water (50' minimum):	>50'
All Components Isolation Distance in Feet to Nearest Property Lines (10' minimum):	>10'
All Components Isolation Distance in Feet to Nearest Home Foundation (10' minimum):	>10'
All Components Isolation Distance in Feet to Nearest Hardscape/Driveways/Pavement (10' minimum):	>10'
Isolation Distances Additional Notes:	No issues observed,
Installed Per Design?	No
Differences from Original Design:	Design did not state that a new tank was going to be installed.
Additional Inspection Comments:	The homeowner has confirmed that work has been completed without an inspection. 2/9 EB Enforcement letter attached to file.
Did This Permit Have a Variance?	No
Inspector Name:	Evan Beatty, EHSIT, Scott Morris, REHS

Current - Inspection Notes. Designed to help guide new inspectors and build standardization.

Isolation Distances:	50+ft to well on other side of home, 10+ft to home/drive/property
Inspection Comments:	Installed per design
Inspector Name:	Alexander Kimball, REHSIT
Signature/System Approval:	 Signed 9/12/2023, 10:34:42 AM EDT

Photos

Ability to Sign Inspection Report





Attach Photos of Every Major Component



Ability to Caption Photos & Timestamp



Tied into existing cast iron building sewer



Fitting located for building sewer

Ability to Caption Photos

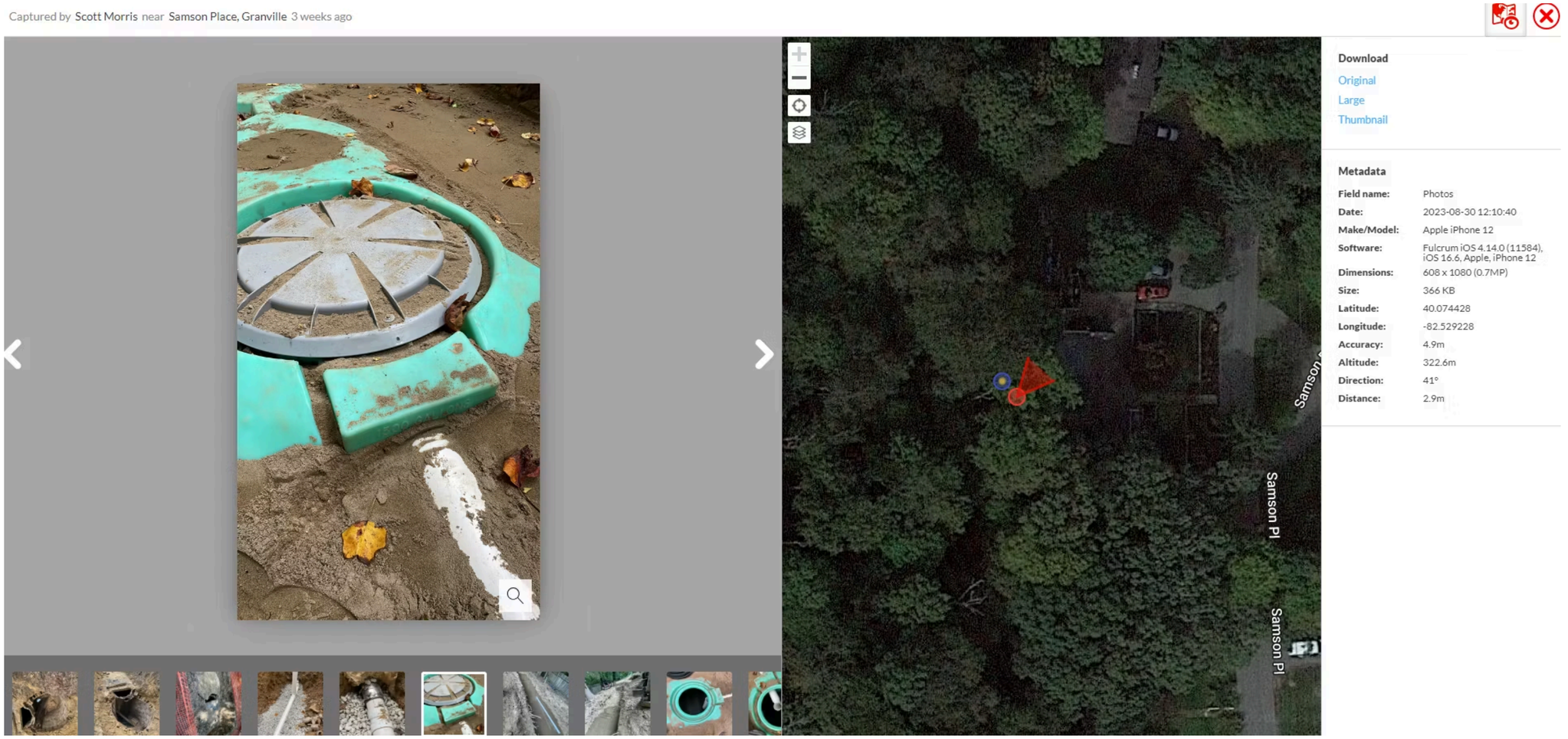
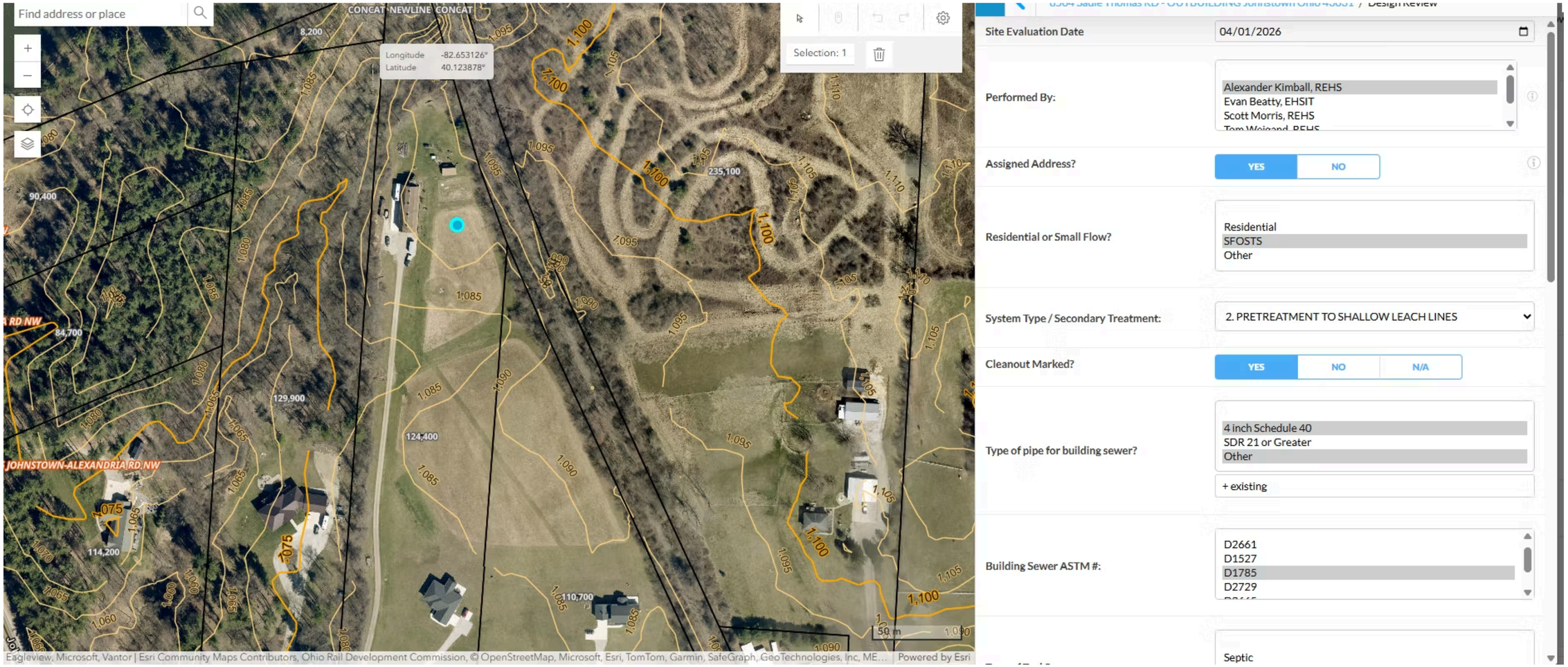


Photo GPS Coordinates

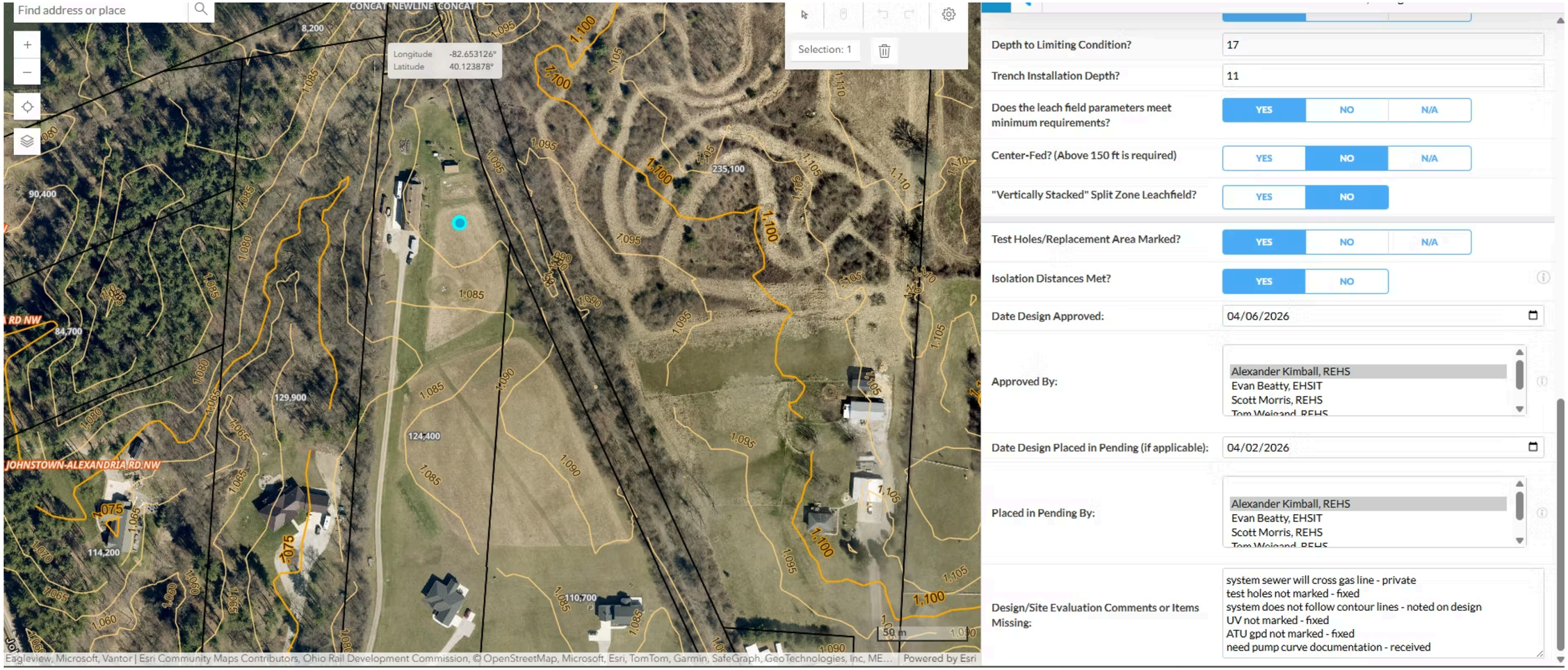


Site Evaluation Date	February 18, 2026
Performed By:	Alexander Kimball, REHS
Assigned Address?	Yes
Residential or Small Flow?	Residential
System Type / Secondary Treatment:	5. SEPTIC TANK TO SAND MOUND
Cleanout Marked?	Yes
Type of pipe for building sewer?	4 inch Schedule 40
Type of Tank?	Septic
Tank size?	1500 (3 BDRMS)
Lift Station Required?	Yes
Lift Station Pump Curve Documentation Present?	Yes
Alarm/Control Panel Marked?	Yes
Mound Review:	
Mound Design Worksheets Run?	Yes
Depth to Limiting Condition?	12
Head Requirement at Lateral End (ft):	5
Does the mound parameters meet minimum requirements?	No
Test Holes/Replacement Area Marked?	Yes
Isolation Distances Met?	Yes

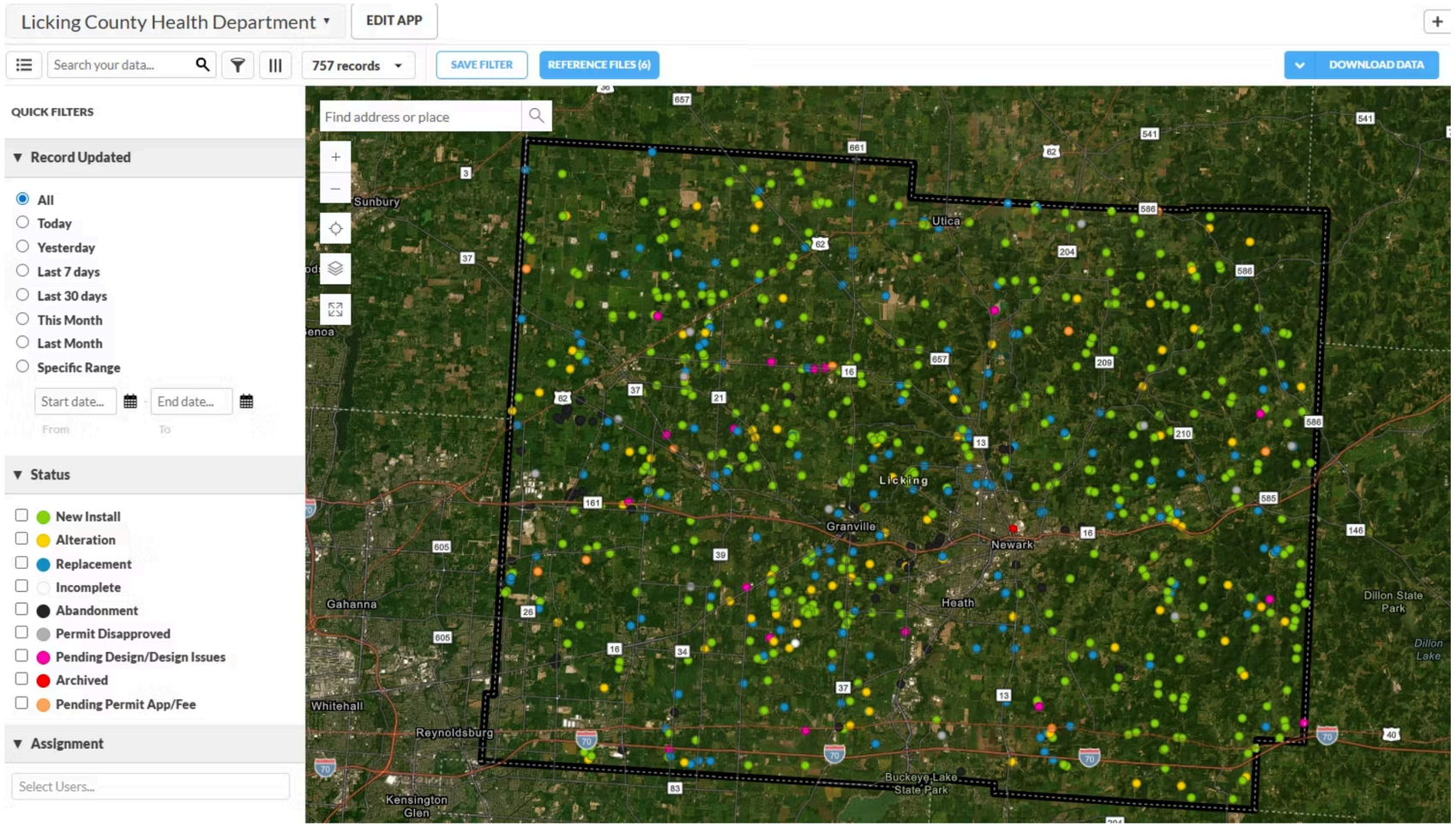
Design Review Checklist - In depth checklists per system type.



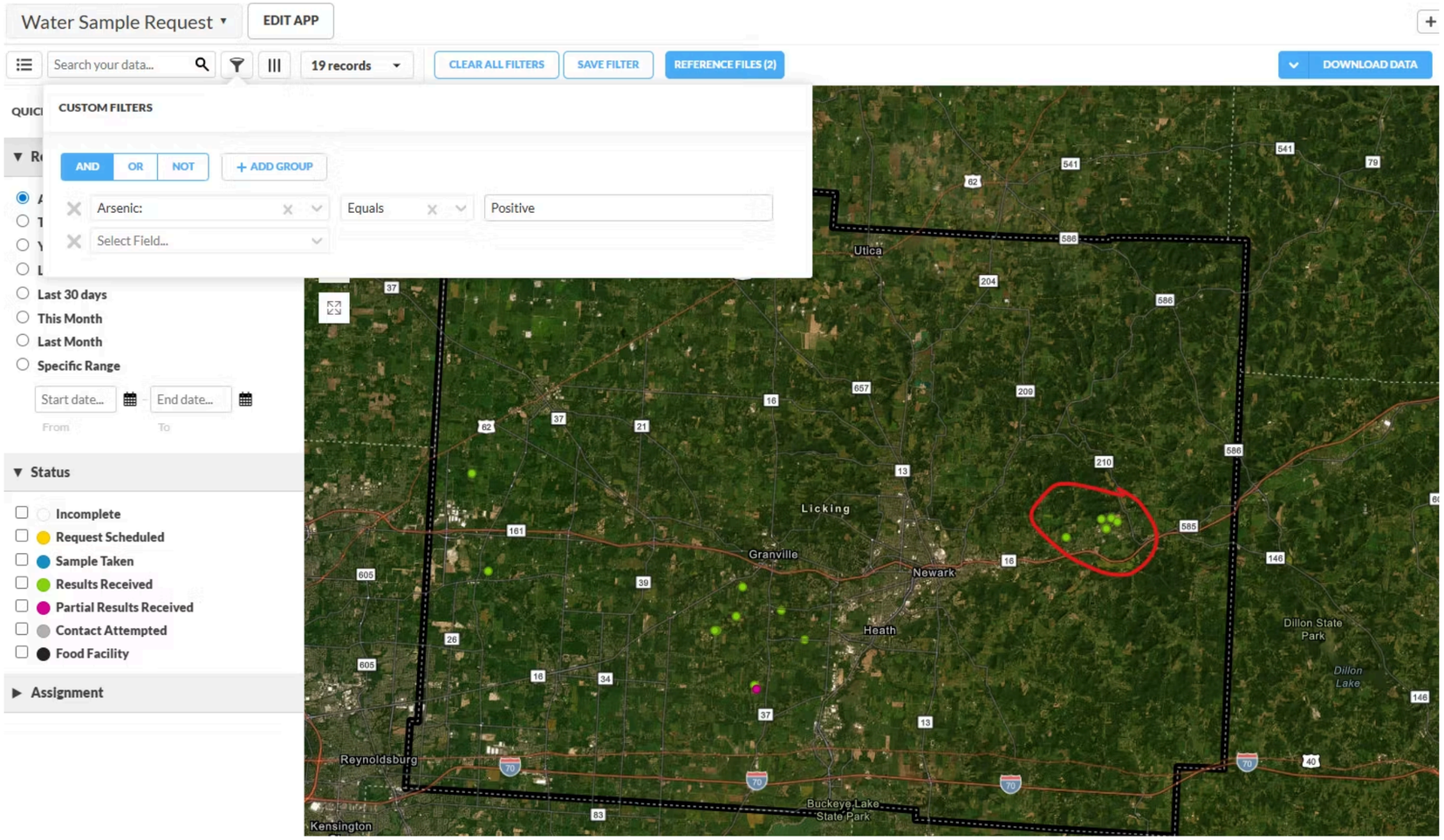
Design Review Checklist - Multiple choice fields that meet code



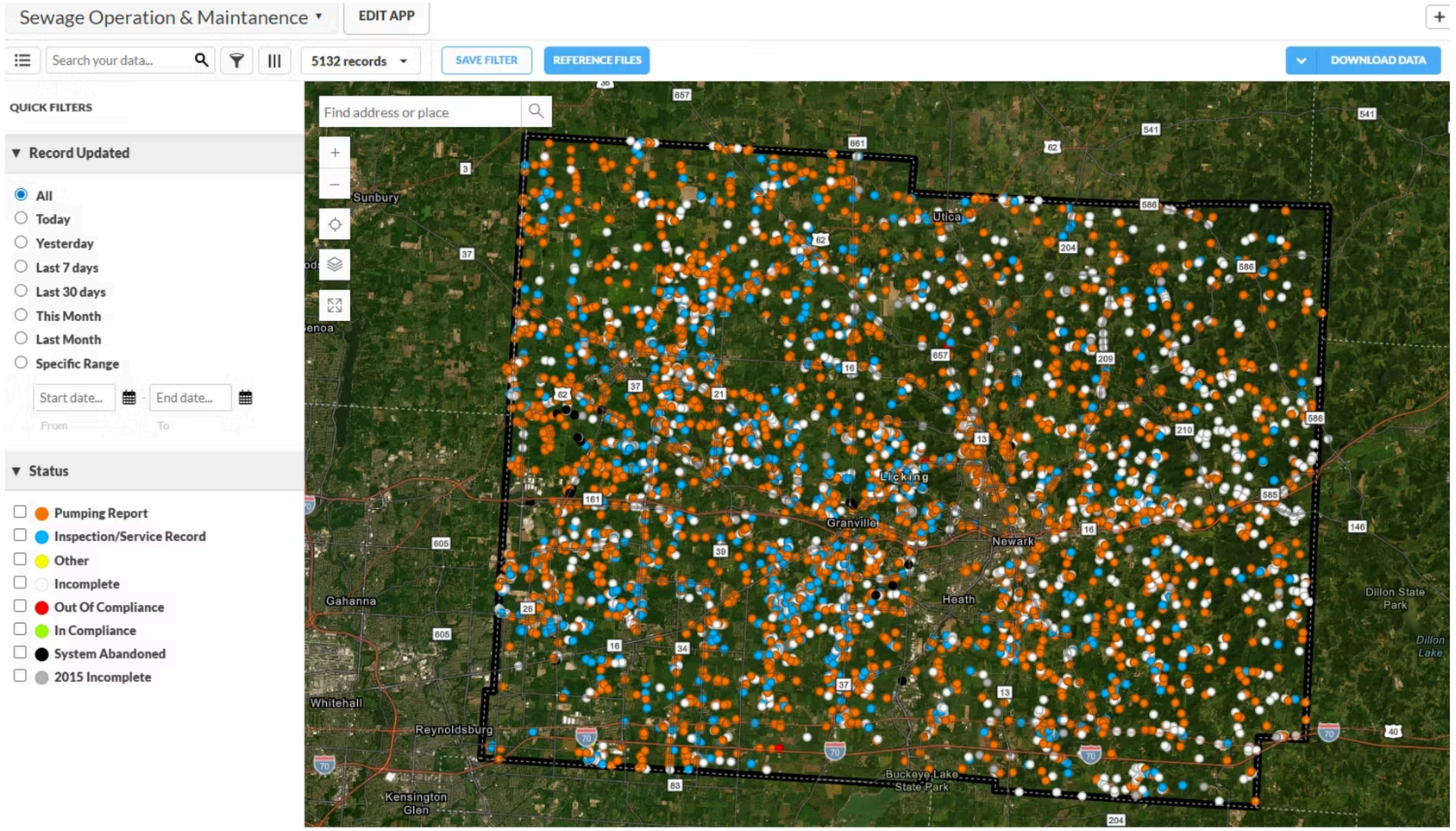
Design Review Checklist. Certain fields will populate based on answer. Can organize what is still needed.



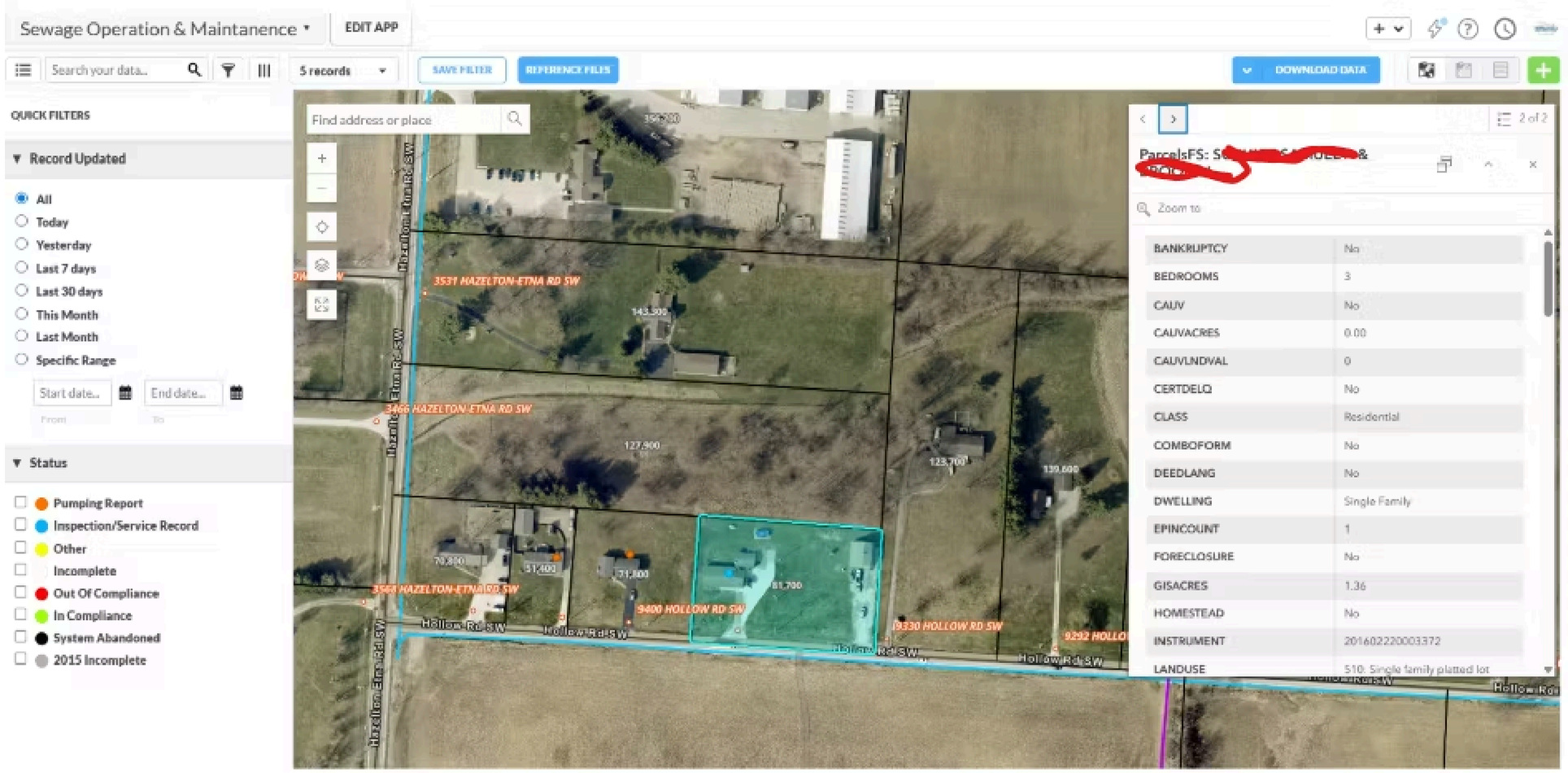
Map View - Can easily search properties and filter



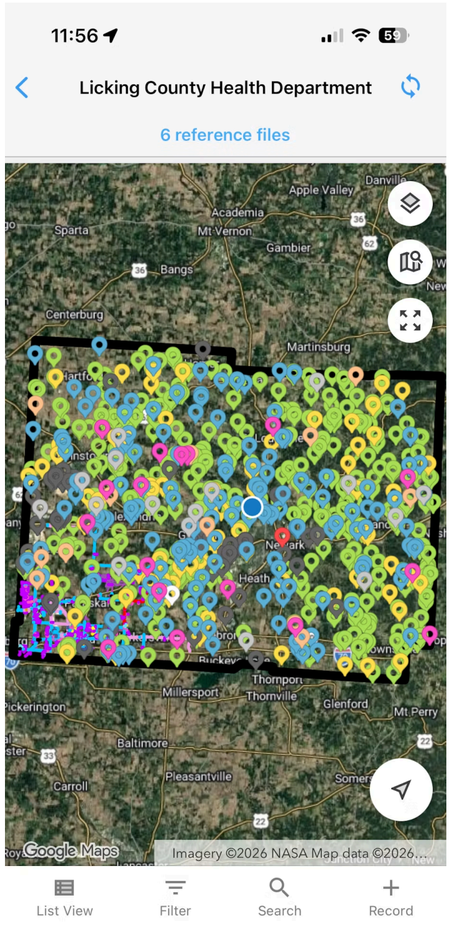
Water Sample App - Ability to filter and see hot spot areas. Can implement public health messaging in those areas.



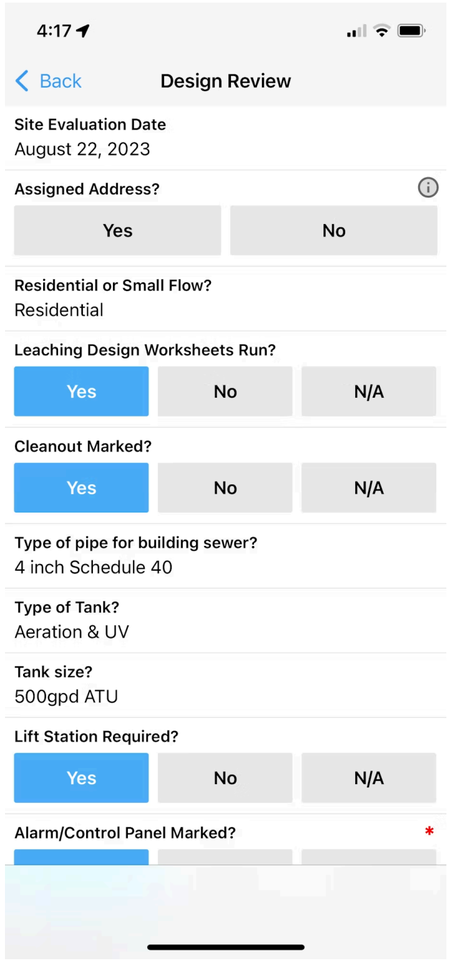
Sewage O & M - Each property is being tracked for any pumping/service related work



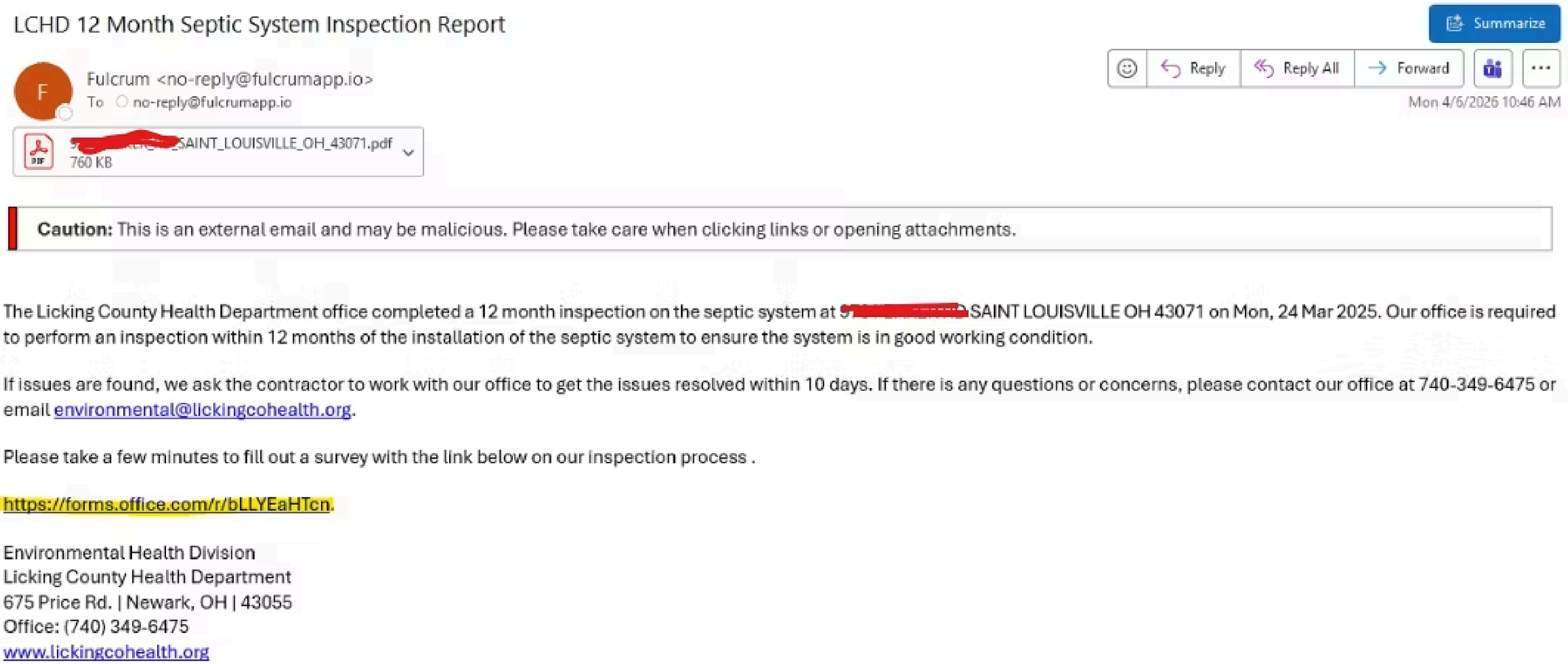
Integrated our county auditor GIS map layers. Address, parcel lines, contour lines, public utility lines, etc.


11:56
Licking County Health Department
6 reference files
Apple Valley
Danville
Academia
Sparta
Mt Vernon
Gambier
Bangs
Centerburg
Martinsburg
Heath
Millersport
Thornville
Glenford
Mt Perry
Baltimore
Pleasantville
Carroll
Google Maps
Imagery ©2026 NASA Map data ©2026...
List View
Filter
Search
Record

Mobile View



Mobile View - Design Review Checklist



LCHD 12 Month Septic System Inspection Report

Summarize

Reply | Reply All | Forward

Mon 4/6/2026 10:46 AM

F

Fulcrum <no-reply@fulcrumapp.io>

To no-reply@fulcrumapp.io

[redacted]SAINT_LOUISVILLE_OH_43071.pdf

760 KB

Caution: This is an external email and may be malicious. Please take care when clicking links or opening attachments.

The Licking County Health Department office completed a 12 month inspection on the septic system at [redacted] SAINT LOUISVILLE OH 43071 on Mon, 24 Mar 2025. Our office is required to perform an inspection within 12 months of the installation of the septic system to ensure the system is in good working condition.

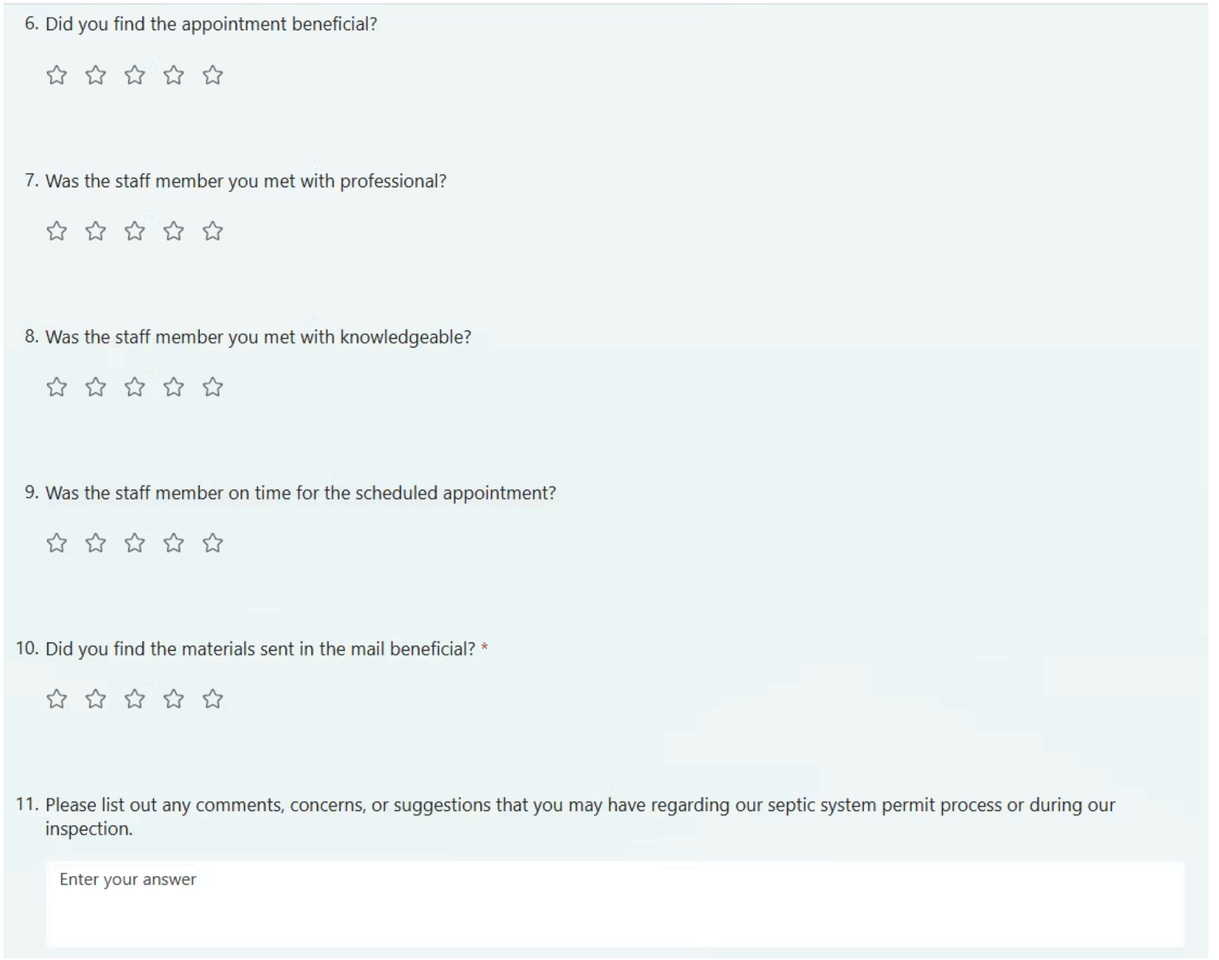
If issues are found, we ask the contractor to work with our office to get the issues resolved within 10 days. If there is any questions or concerns, please contact our office at 740-349-6475 or email environmental@lickingcohealth.org.

Please take a few minutes to fill out a survey with the link below on our inspection process .

https://forms.office.com/r/bLLYEaHTcn.

Environmental Health Division
Licking County Health Department
675 Price Rd. | Newark, OH | 43055
Office: (740) 349-6475
www.lickingcohealth.org

"Customer Satisfaction" survey links in the inspection report emails



12 month inspection survey example

Water Sample Confirmation - [redacted] Granville Licking Ohio 43023 United States

F

Fulcrum <no-reply@fulcrumapp.io>
To no-reply@fulcrumapp.io

Reply | Reply All | Forwar

Thu

Caution: This is an external email and may be malicious. Please take care when clicking links or opening attachments.

This email is confirmation that the requested water sample was taken on Thu, 09 Apr 2026 by Scott Morris, REHS.

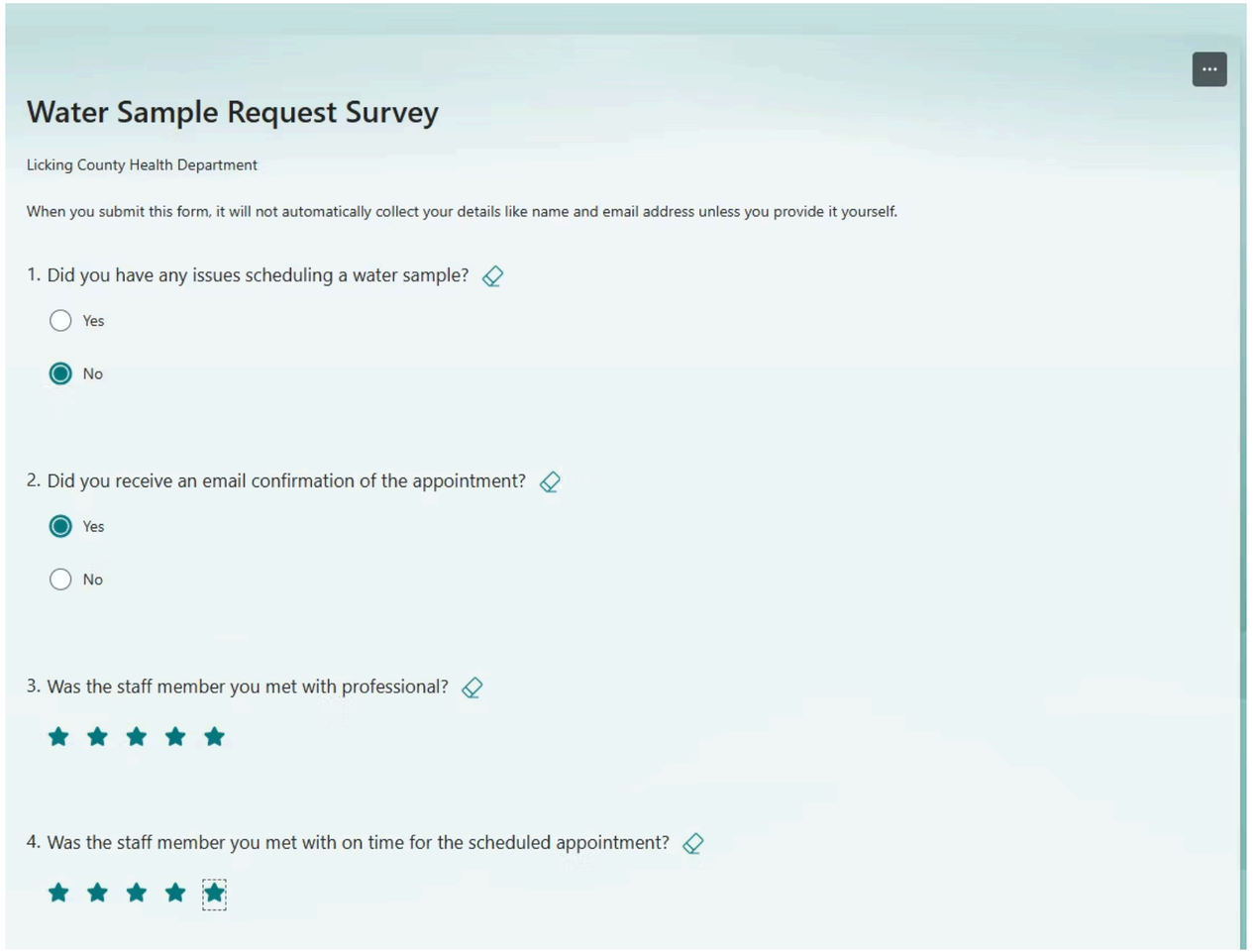
Please advise that results for bacteria samples may take up to 2-4 business days. Any additional parameters that were tested could take up to 2 weeks to get the results back.

Please take a few minutes to complete our survey with the link below regarding our water sample request process.

https://forms.office.com/r/xeUSJ0Vyg1

Environmental Health Division
Licking County Health Department
675 Price Rd. | Newark, OH | 43055
Office: (740) 349-6475
Email: Environmental@lickingcohealth.org
www.lickingcohealth.org

Water sample confirmation email with survey link to homeowner



Water sample survey example

5. Did you schedule an inspection with one of our staff?

More Details

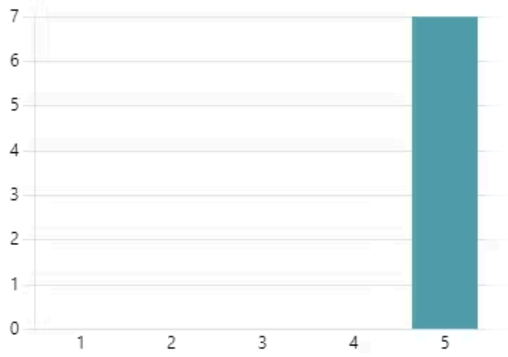
Yes	7
No	1



6. Did you find the appointment beneficial?

More Details

5.00
Average Rating



"Customer Satisfaction" survey results. Provided to BOH and HC in annual report.

Fulcrum Record Assignment - 675 Price Road Newark Licking Ohio 43055

F

Fulcrum <no-reply@fulcrumapp.io>
To no-reply@fulcrumapp.io

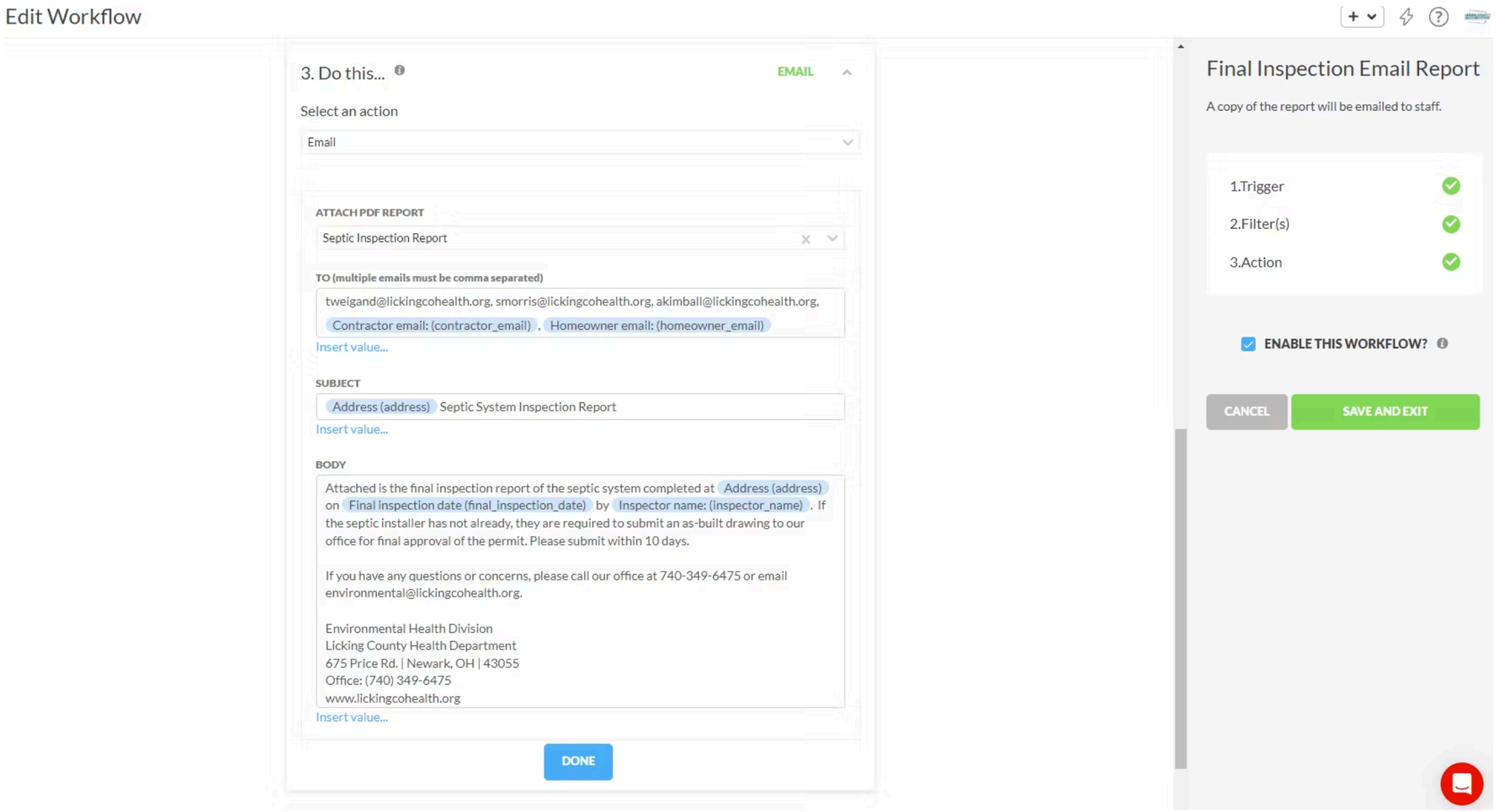
Reply | Reply All | Forward

Tue 8/29/2023 2:39 PM

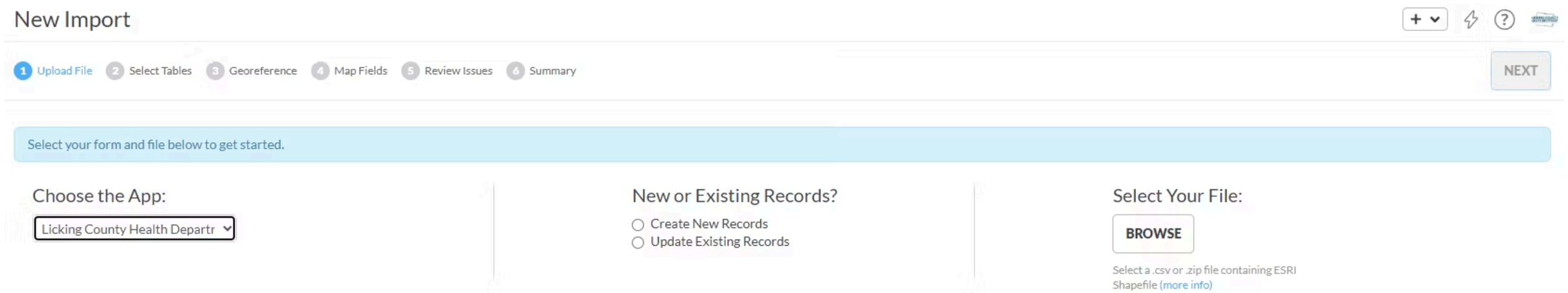
You have been assigned a record at 675 Price Road Newark Licking Ohio 43055 by Scott Morris. Please review the design and complete the Fulcrum checklist.

Environmental Health Division
Licking County Health Department
675 Price Rd. | Newark, OH | 43055
Office: (740) 349-6475
www.lickingcohealth.org

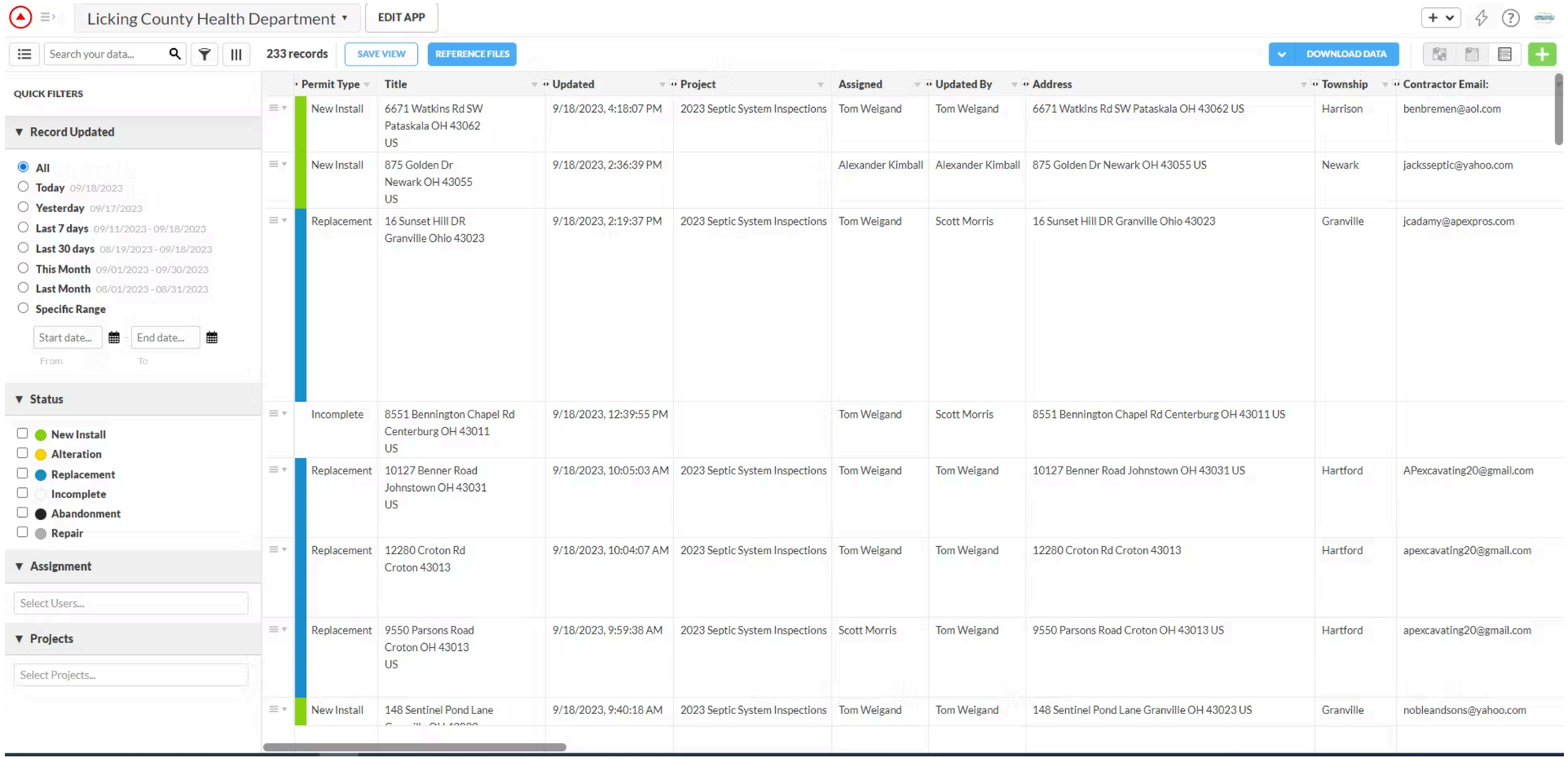
Permit/Record Assignment email to inspectors



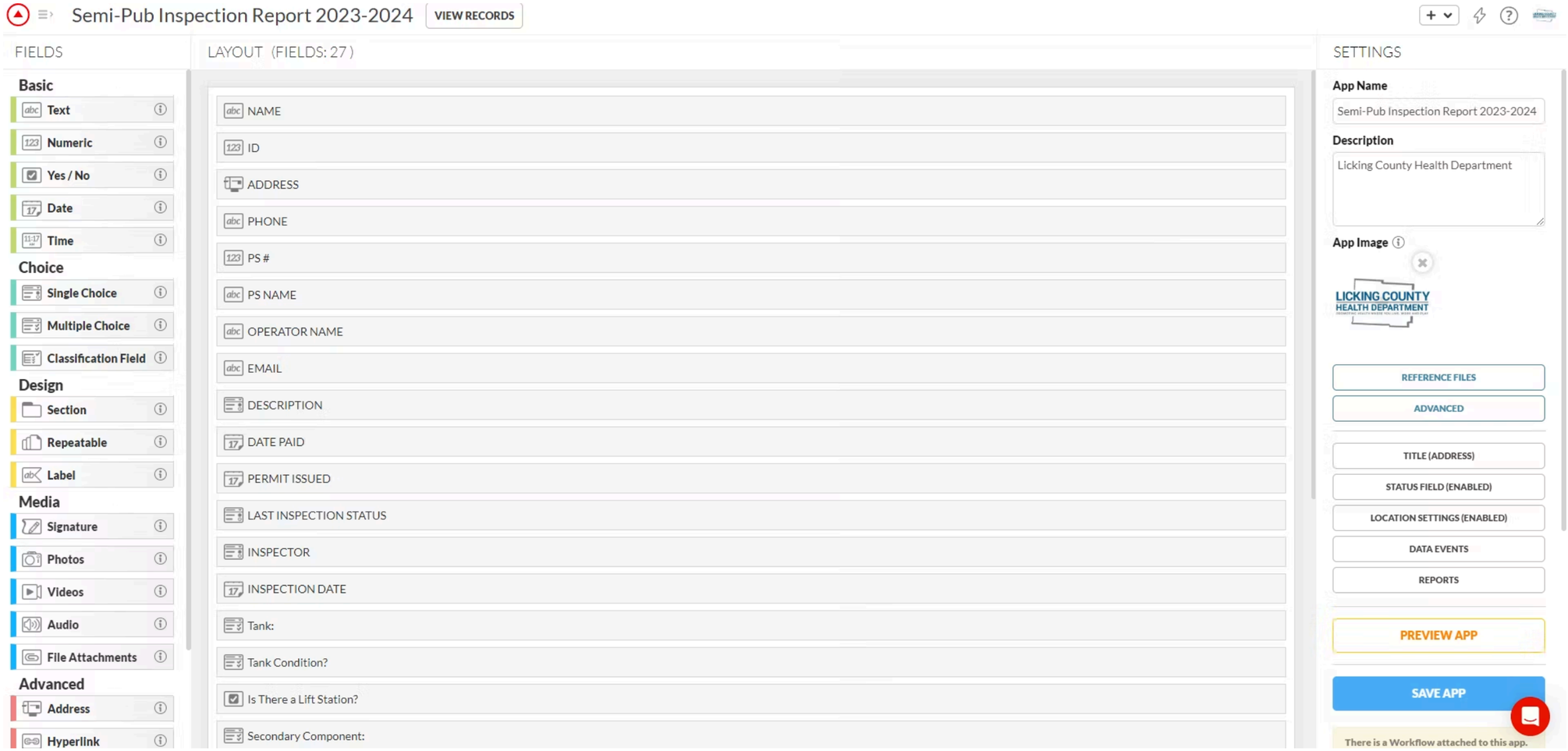
Email Workflow



Excel/CSV file Import & Export



List View - Can easily filter & search



App Creator View

Improvements Made

1. Digitization of reports
2. GIS/Key location information
3. Detailed inspection notes
4. Robust checklists for inspections and site reviews
5. Standardization of inspections and design review for each system type
6. Quicker/efficient communication to all parties involved (installer, homeowner, builder, driller, etc.)
7. Organization. Permit files hardly move until final approval.
8. Performance management reporting. Accurate data to reflect permit turnaround/review times.

Cost

- 6 licenses @ $2,952 per year
- Less than $1,500 spent on 4 iPads and field cases.
- Verizon plans can vary

Questions?

- Scott Morris, REHS
- 740-349-6504
- smorris@lickingcohealth.org

LICKING COUNTY
HEALTH DEPARTMENT
PROMOTING HEALTH WHERE YOU LIVE, WORK AND PLAY

Ask us anything

0 questions

0 upvotes