

# GREENE COUNTY COMBINED HEALTH DISTRICT

360 Wilson Drive, Xenia, Ohio, 45385-1810  
Phone#: (937)374-5600, Toll Free 1-866-858-3588, Fax#: (937)374-5675

## SITE REVIEW and DESIGN PLAN REVIEW APPLICATION

DATE \_\_\_\_\_

SITE REVIEW ID# \_\_\_\_\_

### REMINDER

- Fill out the form as completely as possible.
- Review the instructions to ensure all necessary information is provided.
- The lot must be marked with a sign which is clearly visible from the road.
- The house location and any accessory building sites must be staked.
- The area around the proposed house location and the possible sewage system area must be cleared of tall grass, weeds, brush or crops before the site can be evaluated.
- The Site Review Application is valid for 1 year from the approval date.
- The Installation permit and Operation permit cannot be obtained until the design has been approved

Owner or Buyer \_\_\_\_\_ Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone #: Home \_\_\_\_\_ Work \_\_\_\_\_ Cellular \_\_\_\_\_

Fax \_\_\_\_\_ E-mail \_\_\_\_\_

Location of Property \_\_\_\_\_

Township/City \_\_\_\_\_ Parcel ID \_\_\_\_\_

Subdivision \_\_\_\_\_ Lot # \_\_\_\_\_ Acreage \_\_\_\_\_

Number of Bedrooms \_\_\_\_\_ Foundation Type:  Basement  Crawl space  Slab

Bathroom in Basement  Walkout Basement

**Do Not Write Below This Line – For office use only**

- . . . Site & Soil Evaluation Form Submitted
- . . . Scaled Drawing Submitted
- . . . System Design Submitted
- . . . Proposed House Plan Submitted

Status:  Approved  Disapproved Sanitarian \_\_\_\_\_ Date \_\_\_\_\_