



**TOWN OF HALIFAX**  
Septic Plan Preparation & Review – checklist  
Please **COMPLETE** Before Returning

Location: \_\_\_\_\_  
(Lot #/Property address)

Design Engineer: \_\_\_\_\_

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

Review Engineer: \_\_\_\_\_

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

Des. Eng.    Rev. Eng.    { **Engineers: Please check off each item** }

1.   Maximum of 1"=40' Scale
2.   Location and dimensions of system, (including reserve area)
3.   Design flow calculation (110 gal/bdrm/day, or other, as required)
4.   Septic Tank – 1,500-gallon minimum, (Zabel Filter or equivalent)
5.   Garbage Grinder – Yes \_\_\_\_ No \_\_\_\_
6.   Septic system sizing calculations, (Leaching facility: \_\_\_\_\_ sq.ft.)
7.   Soil logs, perc test data and location of test pits and perc tests
8.   When using sieve analysis, provide the silt/sand/clay triangle on the plan.
9.   Location of existing and proposed water supply (including water mains) are shown on the plan.
10.   Location of wells within 200' of system (if none, statement saying so)
11.   Location of streams, surface and subsurface drains, and/or wetlands within 100' of system and reserve area or a statement that none exist within 100'
12.   Statement regarding whether or not property is in a Zone II.
13.   Limit of unsuitable material excavation (if required)
14.   Ground water table adjustment calculations, when applicable.
15.   Hydraulic profile system
16.   Details of elements of system (septic tank, leaching facility, etc.).
17.   Slope breakout calculations (when applicable).
18.   Existing contours to be shown a minimum of 25' off subject property.
19.   Proposed contours to be shown.

20.   Design calc for pump sizing (if used).
21.   Location of flood plain district.
22.   Benchmark location and elevation.
23.   This Plan requires a variance. Yes \_\_\_\_ No \_\_\_\_
24.   Variance requests reviewed.
25.   An abutters list has been pulled in preparation for a Public Hearing. Yes \_\_\_\_ No \_\_\_\_
26.   Location of any and all easements must be shown (if applicable).
27.   Show existing abutting foundations within 25' of SAS or statement of none existing.
28.   Buoyancy calculations, if needed.
29.   If septic tank sits in the water table, a monolithic tank is required.
30.   Monolithic septic tank needed if within 200' of Monponsett Ponds.
31.   Concrete walls require structural specifications and final inspections.
32.   Designer's seal and signature.
33.   What lead you to believe the system is in failure? (Please choose or explain.)  
 a. Title V Inspection Report \_\_\_\_\_  
 b. Interview with homeowner \_\_\_\_\_  
 c. Other (Please explain.) \_\_\_\_\_
34.   Electric junction box shall be outside of pump chamber riser
35.   If an I/A/Secondary Treatment system is being proposed, you must submit the most current DEP Approval Letter to the Board of Health with plan.
36. Other comments: \_\_\_\_\_

<p><b><u>Design Engineer</u></b>  <b>***</b>I certify that all checklist items have been shown on my plan except as noted:        _____        Design Engineer _____ Date _____</p>
<p><b><u>Review Engineer</u></b>        (One of the three <b>***</b> recommendations below is required with signature and date)  <b>***Recommended for approval with the following corrections:</b> _____        _____        Reviewer Signature _____ Date _____  <b>***Recommended for approval:</b>        Reviewer Signature _____ Date _____  <b>***Not Recommended for approval:</b>        Reviewer Signature _____ Date _____</p>