CALHOUN COUNTY PUBLIC HEALTH DEPARTMENT – ENVIRONMENTAL HEALTH
190 E. Michigan Avenue, Battle Creek, MI 49014
Phone (269) 969-6341 FAX (269) 969-6490

REQUEST FOR SITE EVALUATION

***IMPORTANT NOTE:* Fill out completely and attach requested information or form may be returned**

LOCATION (Name of Road): _____ **TOWNSHIP:** _____

SPECIFIC DIRECTIONS TO PROPERTY:

NAME AND PHONE NUMBER(S) OF INDIVIDUAL(S) MEETING THE INSPECTOR: _____

VEHICLE YOU WILL BE DRIVING, MAKE & COLOR: _____

PRESENT OWNER(S): _____ **PHONE:** (Home) _____ (Work) _____

HAVE YOU OWNED THE PROPERTY SINCE JULY 6, 1987? YES ☐ NO ☐

FACILITY TO BE: ☐Residential ☐Public ☐ Governmental

IF SITE APPROVED, DO YOU WANT PERMIT(S) AT TIME OF APPOINTMENT? YES ☐ NO ☐

Residential: Sewage Disposal Permit $190; Well Permit $160; Both $350 - Payable at time of appointment. Permits expire after 12 months.

IF YES, COMPLETE THE FOLLOWING:
(Owner's name/mailing address/phone)

Number of Bedrooms _____ Garbage Disposal: YES ☐ NO ☐ Bathroom in Basement YES ☐ NO ☐

*** A BACKHOE (CUT RANGE 8' – 10') IS REQUIRED FOR ALL SITE EVALUATIONS ***
A backhoe MUST BE available at time of evaluation (unless previous arrangements with sanitarian have been made) for sanitarian to observe soils as hole is being dug. Multiple holes may be required.

- **SUBDIVISIONS OR SITE CONDOMINIUMS** WILL REQUIRE A MEETING.
  Please contact this office at 269-969-6341. *THIS FORM NOT APPLICABLE*.
- **RESURVEY OF PREVIOUSLY APPROVED SITES WILL INVALIDATE EVALUATION.**
- **ENGINEERED SYSTEMS ARE NOT APPROVED FOR NEW CONSTRUCTION.**

THE FOLLOWING IS REQUIRED PRIOR TO SETTING AN APPOINTMENT. PLEASE PROVIDE COPIES

☐Evaluation fee with check payable to CCPHD: $125 fee for each building site, including land division
*Credit card payment accepted with faxed paperwork (see list below)
☐ If backhoe cut is provided by CCPHD: Total fee $325 (includes $125 evaluation fee)
☐Legal description
☐ Tax ID number _____
☐ Site/lot map
If permits desired, show location of house, etc
☐ Signed permission from owner of property

☐ **NOTE: You MUST Call MISS DIG prior to the appointment (1-800-482-7171) to mark all buried utilities**

If report(s) is mailed, mail to:
(name and address) _____

Today's Date: _____
Print Name and Title: _____
Applicant's Phone: (Home) _____ (Work) _____ (Cell) _____

For CCPHD use:

AAA or H&S *Called* ☐ *Faxed* ☐ *Logged* ☐	**Calendar** ☐	**Appointment Date:**

Revised 10/1/16 – 9/30/17