

GILA COUNTY WASTEWATER DEPARTMENT
ADMINISTRATIVE REVIEW CHECKLIST
CONVENTIONAL SYSTEM

Date: ____/____/____ **Owner:** _____ **APN:** _____ - _____ - _____

<u>OK/ Deficiency /NA</u>	<u>Review:</u>	<u>Date Corrected</u>
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NOI:

- | | | | | |
|--------------------------|--------------------------|--------------------------|--|-------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Signed B-24_____ | _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Verify APN & Owner_____ | _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Verify Contractors License with the ROC_____ | _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Signed/Dated (Must be signed by owner or Power of Atty) _____ | _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Property Owner's Name, address, phone #_____ | _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | System Design Indicated_____ | _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Physical/Legal Address of Property (If available) _____ | _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Latitude/Longitude_____ | _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Verify GPS coordinates with Soil _____ | _____ |

EH FILE:

- | | | | | |
|--------------------------|--------------------------|--------------------------|--|-------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Contractors' soil or perc on file_____ | _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Inspectors' soil or perc on file_____ | _____ |

ADEQ SITE INVESTIGATION REPORT

- | | | | | |
|--------------------------|--------------------------|--------------------------|--|-------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Signed/Dated (Must be signed by owner or Power of Atty) _____ | _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Soil Evaluation Results/Perc Test Results_____ | _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | ADEQ Form with all required attachments_____ | _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Depth to Groundwater with proof attached_____ | _____ |

PROPOSED SYSTEM:

- | | | | | |
|--------------------------|--------------------------|--------------------------|-------------------------------------|-------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Included, completed & accurate_____ | _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Signed/Dated _____ | _____ |

GENERAL INFORMATION:

- | | | | | |
|--------------------------|--------------------------|--------------------------|--|-------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Engineer's/Designer's Name, address, phone #_____ | _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Contractor/Installer's Name, address, phone #_____ | _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Payment_____ | _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Map or directions to the site_____ | _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | A312G_____ | _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Statement of Understanding_____ | _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Owner-Installer Form_____ | _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Floodplain Report _____ | _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Material List_____ | _____ |

SITE PLAN:

- | | | | | |
|--------------------------|--------------------------|--------------------------|---|-------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Submitted_____ | _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Check for easements Plat &/or ROS_____ | _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | North Arrow_____ | _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Signed/Dated_____ | _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Lot #, subdivision, APN, 911 address (if available) _____ | _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Name of property owner_____ | _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Scale; 1"=10' or 20' or 30' or 40' or 50' or 60' _____ | _____ |

<u>OK/ Deficiency /NA</u>	<u>Review:</u>	<u>Date Corrected</u>	
<input type="checkbox"/>	<input type="checkbox"/>	Contours &/or Slope_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	Lot lines and easements with dimensions_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	Roads names surrounding property_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	Home, decks, garage, out buildings & all proposed structures to scale_	_____
<input type="checkbox"/>	<input type="checkbox"/>	Driveway, parking area, RV parking _____	_____
<input type="checkbox"/>	<input type="checkbox"/>	Electric line_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	Water main line_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	Show water meter or well: show water line to home _____	_____
<input type="checkbox"/>	<input type="checkbox"/>	Well 100' setback _____	_____
<input type="checkbox"/>	<input type="checkbox"/>	Show 50ft setback to adjacent lots without water service_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	Water intake from River or Creeks (surface water used for homes) ____	_____
<input type="checkbox"/>	<input type="checkbox"/>	Primary soil profile and or perc test holes shown in actual location____	_____
<input type="checkbox"/>	<input type="checkbox"/>	Reserve soil profile and or perc test holes shown in actual location____	_____
<input type="checkbox"/>	<input type="checkbox"/>	Other features (includes setback to foundations, footers, driveway)____	_____
<input type="checkbox"/>	<input type="checkbox"/>	Sewer line_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	Cleanout adjacent to home & every 50ft in sewer line_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	Septic tank, size_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	Risers to Grade or a marker to grade_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	Transport line _____	_____
<input type="checkbox"/>	<input type="checkbox"/>	Distribution box_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	Identify each component_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	Tank located_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	Leach lines located_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	Primary leach lines labeled_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	Reserve leach lines labeled_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	Width & length of leach line_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	Distance between trenches (edge to edge) _____	_____
<input type="checkbox"/>	<input type="checkbox"/>	I.P.s labeled_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	Abandon Old Tank Statement on Site Plan_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	Hydraulic Profile_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	System and home on same parcel_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	Show 100ft setback from the 10 year event_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	Show 50ft (or 25' w rip rap)setback from a 20 acre or greater wash _____	_____
<input type="checkbox"/>	<input type="checkbox"/>	Anti-flotation & Flood Plain Protection (if applicable)_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	Proof of Pre 1974 plat regarding no reserve required_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	Slope greater than 15% setback met (20 or 50ft) _____	_____