

**INDIAN HEALTH SERVICE**

**APPLICATION  
FOR  
INDIVIDUAL  
WATER &  
WASTEWATER  
FACILITIES**

Please retain top information section for your records and  
return the application section to your tribal IHS liaison.

# HOMEOWNER'S CHECKLIST

*Here's what you can expect from the Indian Health Service (IHS) as we install your water or wastewater facilities and a few things we will need from you to keep your project moving forward.*

*Follow the outline, below, of the tasks involved and timelines for completing each phase. All timelines are approximations and begin after you provide your portion. If, at anytime, through this process you have questions, please feel free to call the IHS at (206) 615-2794.*

- Check when completed

## **PHASE 1: GETTING STARTED**

### **What you give us:**

- A complete IHS application
- A copy of your deed or lease to your land
- A clear idea of your property's boundaries

### **What we do for you – *within about 3 weeks after all documents are received:***

- Call you to outline the process
- Visit your home site to look it over with you and discuss the plan

## **PHASE 2: DRAWING IT UP**

### **What you give us:**

- Any specific information you have regarding the composition of your land: soils, surveys, well logs, etc.
- Prompt feedback if/when we need it

### **What we do for you – *within about 1 month after all information is received:***

- Gather technical information about your property
- Plan out your water and wastewater facilities based on your feedback
- Design the facilities and estimate the cost
- Apply for septic installation permits

## **PHASE 3: GETTING IT DONE**

### **What you give us:**

- Access to your nearly completed new or existing home

### **What we do for you – *within about 1 month after foundation is complete and power is available:***

- Solicit bids for and award the contract
- Organize the construction schedule
- Oversee and inspect construction

## **PHASE 4: FINISHING IT OFF**

### **What you do:**

- Call the contractor (who is under warranty) to service your system
- Call IHS if the contractor doesn't respond
- Provide feedback--How can we improve?

### **What we do for you – *within about 1 month after construction is complete:***

- Provide a "Homeowner's Information Packet" with everything to help you understand about caring for your water or wastewater system
- Act as an ongoing resource for questions about your water or wastewater system



**Department of Health & Human Services  
INDIAN HEALTH SERVICE**

**Office of Environmental Health and Engineering (OEHE)  
Seattle District Office; 2201 6<sup>th</sup> Avenue, Rm. 925; Seattle, WA 98121; (206) 615-2794**



**Department of Health & Human Services**  
**INDIAN HEALTH SERVICE**  
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Seattle District Office; 2201 6<sup>th</sup> Avenue, Rm. 925; Seattle, WA 98121; (206) 615-2794

### **About Us**

The Sanitation and Facilities Construction (SFC) Program and the Office of Environmental Health and Engineering (OEHE) were created within Indian Health Service (IHS) to support necessary components of IHS. The SFC Program provides American Indian homes and communities with essential water supply, sewage disposal, and solid waste disposal facilities. SFC and OEHE environmental engineers plan, design and manage water and wastewater construction projects for tribal members in Washington State and throughout the nation.

Our goal is to raise the health status of American Indians to the highest possible level by providing public health services. The SFC Program also supplies technical and financial assistance to the Tribes for cooperative development and continued operation of safe water, wastewater, and solid waste systems and related support facilities.

### **What is an Onsite Sewage System?**

An onsite sewage system (OSS) is also known as a septic system. OSS are designed to help prevent the spread of illness and disease by collecting, treating and dispersing wastewater from a home or business into the native soils near that building.

An OSS is typically comprised of two or more components linked together by pipes. There are two general types of systems used most often in Washington State. The unique site conditions for each individual lot (e.g., soil type and depth, size of lot, distance to surface waters and wells, etc.) determine which type of OSS can be installed. Different combinations of components may be used to best suit site conditions and owner preferences.

### **General Types of OSS**

#### **Standard Gravity OSS**

This is the most common type of system and it usually has two main parts: the septic tank and the drainfield. Sometimes a pump tank is also used in a standard system to transport the effluent to a drainfield above the septic tank.

*Indian Health Service (IHS) strongly recommends pumping the septic tank at least once every three years.*

#### **Alternative OSS**

This type of system is required where soil depth and/or other site conditions do not allow a standard gravity system to be used. IHS highly recommends that alternative OSS have annual operation and maintenance (O&M) and be inspected at least once a year by a certified maintenance provider.

## Onsite Sewage System: DO's

### DO Know Where Your OSS is Located and Protect it:

Have a copy of your as-built drawing or map the location of all parts of your septic system. IHS or your local health district can provide you with a copy.

If you move, remember to provide all records and information to new owners or tenants.

Keep a "rainy day fund" to cover possible repair and maintenance costs.

Educate your family, guests or renters on how to care for the system.

### DO Inspect Your OSS Yearly:

Keep accurate, detailed records of any repairs and pumping.

Maintain an operations and maintenance contract with a licensed specialist.

### DO Use Water Wisely:

Conserve water through the use of low-flow fixtures, doing laundry throughout the week rather than on one specific day, limit shower length and fix any plumbing leaks promptly.

Direct runoff from roofs, streets, driveways and adjoining property away from the sewage system area.

Keep any irrigation (sprinkler) system at least 10 feet from the edge of the on-site sewage system.

Drain water from hot tubs and water softeners away from the drainfield, storm drains and surface waters.

## Onsite Sewage System: DON'Ts

### DON'T Compact Soils of Drainfield or Reserve Area in any Way by:

Driving/parking vehicles, boats or heavy equipment in the OSS area.

### DON'T Disturb the Drainfield or Reserve Area by:

Building, burning or grazing livestock in the area.

Covering it with landscaping materials—other than grass.

Driving across the sewage system, grading, leveling, filling or cutting the area.

Installing a sprinkler system or planting deep-rooted water-loving plants over the drainfield.

Planting a vegetable garden for human consumption on your drainfield or mound.

### DON'T Overload the System by:

Using too much water.

Using a garbage disposal.

Using tank additives or "miracle" septic system cleaners.

Discarding medications or strong household cleaning products down the drain or toilet.

Allowing backwash from water softeners or conditioners.

Pouring shortening or meat fats down the drain (which will turn into solids in cold water).

**MOST IMPORTANT: Pump your septic tank at least once every three years!**



# APPLICATION

For  
Individual Site Sanitation Facilities  
Portland Area Indian Health Service  
Seattle District Office



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## HOMEOWNER INFORMATION

1. Name(s): \_\_\_\_\_
2. Telephone--Home: \_\_\_\_\_ Work: \_\_\_\_\_ Cell: \_\_\_\_\_
3. Email Address: \_\_\_\_\_
4. Current Mailing Address: \_\_\_\_\_  
\_\_\_\_\_
5. Have you previously received sanitation facilities from IHS? \_\_\_\_\_ If so, what year? \_\_\_\_\_
6. Of which Tribe are you a member? \_\_\_\_\_

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## HOMESITE INFORMATION

7. Site Address: \_\_\_\_\_  
\_\_\_\_\_
8. County: \_\_\_\_\_
9. Township: \_\_\_\_\_ Range: \_\_\_\_\_ Section: \_\_\_\_\_
10. Directions to/location of home to be served: *(from Seattle)* \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
11. Best time of day for IHS site visit: 8 am-Noon \_\_\_\_\_ Noon-4 pm \_\_\_\_\_  
**Note:** To make site accessible for visit, please move vehicles and leash animals.
12. Land Status: Trust (Tribal): \_\_\_\_\_ Trust (Indiv): \_\_\_\_\_ Fee: \_\_\_\_\_ Divided Interest: \_\_\_\_\_  
If leased, number of years: \_\_\_\_\_  
**Note:** A legal deed or lease, establishing the applicant as the owner or lessee, must be submitted.
13. Type of Home: Stick-built \_\_\_\_\_ Modular \_\_\_\_\_ Mobile \_\_\_\_\_  
**Note:** Mobile homes must be off of wheels and have complete skirting.
14. Year that home was built: \_\_\_\_\_ Years you have lived in home: \_\_\_\_\_
15. Number of bedrooms: \_\_\_\_\_ bathrooms: \_\_\_\_\_ residents: \_\_\_\_\_
16. Home is or will be primary residence: Yes: \_\_\_\_\_ No: \_\_\_\_\_
17. Home constructed/on site? Yes: \_\_\_\_\_ No: \_\_\_\_\_
18. Date home will be constructed/delivered: \_\_\_\_\_

19. Electrical power available at site: Yes: \_\_\_\_\_ No: \_\_\_\_\_ If not, when: \_\_\_\_\_

**Note:** Construction cannot begin until power is available at site.

20. Existing Water facilities currently at site:

- Individual Well, with Pump and Pressure System
- Community Water Connection
- Are existing facilities failing or insufficient?
- None

21. Existing Sewer Facilities currently at site:

- Septic Tank & Drainfield
- Community Sewer Connection
- Are existing facilities failing or insufficient?
- None

22. Likely Water Facilities Requested:

- Individual Well
- Well Pump w/Pressure System
- Community Water Connection

23. Likely Sewer Facilities Requested:

- Individual Septic Tank/Drainfield
- Community Sewer Connection
- Other \_\_\_\_\_

24. Reason(s) for Requested Service:

- Service to new home
- Service to rehabilitated home
- Replacement of failed facilities
- Other \_\_\_\_\_

25. Please attach the following documents to this application (if available):

- Legal deed or long-term (15+ yr) lease (**required**)
- Proof of tribal membership
- Legal survey of land by licensed surveyor
- Site plan showing property lines and location of all future or existing buildings, roads, water, etc.
- As-built drawings for existing water or sewer facilities
- Plans showing dimensions of future home
- Proof of any easement required for service

**Note:** In some cases, property corners set by a licensed surveyor will need to be visible to install sanitation facilities.

# INDIVIDUAL SITE GUIDELINES

## HOMEOWNER AUTHORIZATION

I hereby certify that the information in this Application is true and accurate to the best of my knowledge.

I hereby agree:

- To allow IHS or its authorized representatives to enter upon my property to evaluate the site and to construct or inspect the facilities requested in this application.
- To obtain all easements and permits necessary for the requested sanitation facilities.
- To accept ownership upon completion of the requested sanitation facilities, and to operate and maintain them in a satisfactory manner.

I understand that these facilities will be provided only if funding is available and if this application meets IHS qualification requirements.

If requesting an individual septic system, I have read the septic care information attached to this application.

26. \_\_\_\_\_  
Signature of Head of Household Date

## TRIBAL AUTHORIZATION

27. The \_\_\_\_\_ Tribe appoints \_\_\_\_\_ as liaison to coordinate Tribal participation in serving this applicant.

Liaison Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Liaison Mailing Address: \_\_\_\_\_

28. Zoning:  
Is the proposed home site in conformance with zoning regulations? \_\_\_\_\_  
Is there any reason that this site is not acceptable for residential construction? \_\_\_\_\_

Remarks: \_\_\_\_\_

29. Land Status Certification: The Tribe has reviewed the applicant's land status as reported above and hereby certifies that the information **is** \_\_\_\_\_ or **is not** \_\_\_\_\_ current and accurate.  
If not, what is the actual status? \_\_\_\_\_

30. Tribal Eligibility and Endorsement: This application has been reviewed by the Tribe. The applicant is a member of a Federal Recognized Tribe and the application is eligible. Therefore; the applicant is recommended for services.

\_\_\_\_\_  
Signature of Tribal Chairperson or Liaison Date

**Note:** Incomplete or unsigned forms will be returned for completion.

## INDIAN HEALTH SERVICE ACKNOWLEDGEMENT

31. Application Received:

\_\_\_\_\_  
IHS Service Request Manager Date



# Tulalip Utility Authority

## Water – Sewer Service Application and Agreement

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PROPERTY OWNERS REQUESTING A CONNECTION TO TULALIP UTILITY'S WATER SUPPLY SYSTEM MUST AGREE TO:

- Furnish a legal description of the premise to be served.
- Specify the location and size of service required.
- Pay all charges for the new service connection; in addition pay for Any outstanding combined utility charges.
- Provide all approved plans and permits when required.
- The property owner acknowledges their financial responsibility for any costs associated with any street or sidewalk restoration required when installing new service.
- To allow The Tulalip Utilities or its authorized representatives to enter upon my property to evaluate, construct, or inspect facilities listed in application.

Tulalip Utility Authority May:

- Disconnect the domestic water supply for nonpayment of any water charges.
- Temporarily shut-off any service at any time without notice for *emergency repairs*.

*Reference Title 13*

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### CURRENT PROPERTY OWNER:

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_  
( address of site area)

Contact Number: \_\_\_\_\_ Other Contact Number: \_\_\_\_\_

Site/Project (If Applicable) \_\_\_\_\_

LEGAL DESCRIPTION	BILLING ADDRESS
Parcel No: _____	Name: _____
Sec: _____ Town: _____ Range: _____	Address: _____
Block#: _____ LOT#: _____	APT: _____ ST: _____ ZIP: _____
*Please Attached additional documentation	Daytime Phone: _____





X \_\_\_\_\_ Phone: \_\_\_\_\_  
Print Name

X \_\_\_\_\_ Date: \_\_\_\_\_  
Signature of Owner

LAND STATUS

Deed/Mortgage:

- Trust       Fee Simple       Other       Leased

Land Status Certification:

We have had time to review the applicants land status reported above and find that the it:

- Is correct and accurate       Is NOT correct and accurate

TRIBAL PERMIT # \_\_\_\_\_

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

**Inspector's Report**

Planned Installation Date: \_\_\_\_\_  
(Please allow up to 10 working business days for processing)

Date Completed: \_\_\_\_\_ Signature: \_\_\_\_\_

COMMENTS: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_