SECTION I – SEPTAGE REMOVAL AND DISPOSAL

1) Septage Removal Permits

Permits shall be valid for a period of twelve months and shall be subject to being denied, suspended or revoked by the County Board of Health, unless the complete septage removal and disposal is carried out in accordance with Chapter 511-3-1 and the provisions outlined below.

2) Standards for Septage Removal

The following requirements shall be met by individuals certified for septage removal:

A. The manner in which septage will be disposed of shall be included on the application for septage removal. Written authorization shall be submitted with the application from wastewater treatment plants, separate septage handling facilities or permitted land disposal site.

B. The manner in which septage will be removed and transported shall be included on the application for septage removal.

C. Access to the septic tank contents shall be by removal of the lids or access ports. Individuals breaking holes in the septic tank or lids will be subject to permit suspension or revocation.

D. Septage removal means the complete removal of the contents including the liquid, sludge and scum.

E. The inlet and outlet “tees” will be inspected for blockage and damage. If “tees” are missing or damaged, the owner will be notified in writing. Missing or damaged “tees should be replaced.

F. Excavated soil will be replaced.

G. Written documentation shall be provided to the septic tank owner noting the condition of the septic tank. This shall include any damage or missing components observed, and a copy will be provided to the Local Environmental Health Office.

H. Individuals permitted for septage removal shall maintain a manifest identifying the date and location of system serviced and the date and location of final disposal.

3) Septage Disposal

There are three options for septage disposal in Georgia: treatment at a wastewater treatment plant, treatment at a separate septage handling facility and land disposal. Disposal and treatment at wastewater treatment plants, separate septage handling, and land application sites are regulated through Georgia Department of Natural Resources’ Environmental Protection Division.

4) Temporary Storage of Septage

The Department recognizes there may be instances when domestic septage must be temporarily stored until final disposal in the event disposal of septage is delayed by inclement weather; or
a local Department of Georgia Environmental Protection approved treatment facility is briefly inaccessible. The County Board of Health may allow under the authority of the septage removal permit a certified septage or portable sanitation pumper to provide for temporary septage storage at their company’s base of operation by meeting the following criteria:

A. Successful application and approval for on-site storage as reviewed by the local environmental health authority.

B. Installation of below ground tanks must meet the standards and installation requirements of the Department for septic tanks and should be a state approved concrete, plastic or fiberglass tank.

C. Above ground tanks should be placed on a curbed impervious pad made from materials to support the weight load and facilitate clean up in the case of a spill.

D. Tanks should be designed for the stress of the holding capacity.

E. Storage tank volume should be proportional to the scale of business of the pumping company. The maximum projected capacity must be no more than two to three days of typical pumping as demonstrated by manifesting.

F. Temporary storage capacity must be for a single company use only, no multiple haulers comingling or “offloading” from other companies will be allowed. Manifesting must document transfer for truck to tank, etc. to disposal or handling facility.

G. All local and state regulations and laws must be met, inclusive of approved zoning, business licensing, and County Environmental Health Removal and Disposal permitting and necessary inspection.
5) Tables, Figures and Forms

Form 10.1 Waste Removal and Disposal Application and Permit

Application Date: __________
Company Name: __________________________ Company DPH Cert #: __________
Owner/Agent Name: __________________________ Email: __________________________
Company Street Address, City, State, Zip: __________________________
Primary Phone: __________________________ Alternate Phone: __________________________
List Employee Names and DPH Certification Number(s) Performing Pumping:

Circle All Applicable Selections:

Business Type: __________________________
Septage Pumper
Portable Sanitation Pumping

Onsite Storage: __________
Yes  No

Final Disposal Facility Type: __________________________
Land Application Facility
Wastewater Treatment Facility
Wastewater Handling Facility

Disposal Facility or Land Application Site Name: __________________________

Describe business plan for pumping, storing, transferring and disposing:

Applicant Signature: __________________________
Waste Removal and Disposal Permit to be completed by County Environmental Health Department.

Onsite Storage Inspected & Approved: YES NO
Manifest(s) Submitted and Approved: YES NO
Truck Inspection(s) Approved: YES NO
Disposal Facility Letter of Acceptance: YES NO
Application Approved: YES NO
Remarks: _______________________________________

Issuing Inspector: __________________________
Inspector Signature: __________________________
Permit Number: __________________________ * Permit Issue Date: __________________________
* Permits expire at the end of the calendar year.
Form 11.I  Waste Removal and Disposal Inspection Form

<table>
<thead>
<tr>
<th>Vehicle Details</th>
<th>Vehicle 1</th>
<th>Vehicle 2</th>
<th>Vehicle 3</th>
<th>Vehicle 4</th>
<th>Vehicle 5</th>
</tr>
</thead>
<tbody>
<tr>
<td>Volume Capacity (gallons)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>DOT Number</td>
<td></td>
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</tr>
<tr>
<td>State Tag Number</td>
<td></td>
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</tr>
<tr>
<td>Manifest Submitted (Yes/No)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Vehicle Identification**

All items must be displayed on both sides of each vehicle (YES/NO)

<table>
<thead>
<tr>
<th>Name of Person or Firm</th>
<th>YES/NO</th>
<th>Permit Number</th>
<th>YES/NO</th>
<th>2’ Letters &amp; Numbers</th>
<th>YES/NO</th>
<th>Readily Visible</th>
<th>YES/NO</th>
</tr>
</thead>
</table>

**Vehicle Maintenance**

Verified with clean water or inspected during routine pumping (YES/NO)

<table>
<thead>
<tr>
<th>Water Tight Tank &amp; Body</th>
<th>YES/NO</th>
<th>Leakage From Pumps</th>
<th>YES/NO</th>
<th>Leakage From Hoses</th>
<th>YES/NO</th>
<th>Leakage From Valves</th>
<th>YES/NO</th>
<th>Leakage From Fittings</th>
<th>YES/NO</th>
</tr>
</thead>
</table>

**Portable Sanitation Only**

Adequately sized tanks for # of units (rate) served (YES/NO or N/A)

<table>
<thead>
<tr>
<th>Waste Tank</th>
<th>YES/NO</th>
<th>Sanitizing Solution Tank</th>
<th>YES/NO</th>
<th>Potable Water Source</th>
<th>YES/NO</th>
<th>Fresh Water Tank</th>
<th>YES/NO</th>
<th>Labeled “Do Not Drink”</th>
<th>YES/NO</th>
<th>Potable Water Hose Labeled</th>
<th>YES/NO</th>
</tr>
</thead>
</table>

Inspected By: ___________________________

Inspector Signature: ___________________________

Remarks:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

Inspection Approved: Yes  No

Permit Issue Date: ___________________________

Permit Expiration Date: ___________________________