ENVIRONMENTAL HEALTH

Land Use Program

5050 Commerce Drive, Baldwin Park, CA 91706
◆ Telephone: (626) 430-5380 ◆
http://publichealth.lacounty.gov/eh/EP/lu/lu_main.htm

Onsite Wastewater Treatment System (OWTS) Review Application Submission Process

Completed and signed Application for Onsite Wastewater Treatment System Review, corresponding fees and associated documents may be mailed or hand-carried to:

Environmental Health Headquarters
5050 Commerce Drive
Baldwin Park, Ca 91706
Attention: Land Use Program
(626) 430-5380

Inglewood Environmental Health Office
9800 S. La Cienega Boulevard, Suite 850
Inglewood, Ca 90301
Attention: Land Use Program
(310) 338-3226

Santa Clarita Environmental Health Office
26415 Carl Boyer Drive
Santa Clarita, Ca 91350
Attention: Land Use Program
(661) 287-7018

Antelope Valley Environmental Health Office
355-A East Avenue K-6
Lancaster, Ca 93536
Attention: Land Use Program
(661) 471-4842

Calabasas Environmental Health Office*
26600 Agoura Road, Suite 110
Calabasas, Ca 91302
Attention: Land Use Program
(818) 880-3410

***Corresponding fees are NOT accepted at this location**
Please indicate your project site location/APN on the check/money order and mail corresponding fees to:

Environmental Health Headquarters
5050 Commerce Drive
Baldwin Park, Ca 91706
Attention: Land Use Program

Please call for office hours prior to application submission
Make checks or money orders payable to: **LOS ANGELES COUNTY DEPARTMENT OF PUBLIC HEALTH**
DO NOT SEND CASH

Additional Information:

- Effective August 1, 2018 – Two (2) copies of your application and associated documents will be required. The Application for Onsite Wastewater Treatment System (OWTS) Review will not be processed until all required copies are received.
  - One (1) electronic copy is to be submitted to: dlanduse@ph.lacounty.gov
  - One (1) hard copy is to be submitted to any of the offices listed above.
- Please note, in accordance with the California Public Records Act, all documents submitted for the purpose of obtaining permits from a public agency are public records and will be disclosed when specifically requested by the public.
- Incomplete Applications for Onsite Wastewater Treatment System Review will not be accepted.
- **Payment of corresponding fees is required**. Review of your Onsite Wastewater Treatment System will not begin until after payment is received.
- Applications and corresponding fees for Onsite Wastewater Treatment System Reviews are nontransferable.
- Allow **twenty (20) business days** for work plan review and response.
- Field personnel cannot accept payments.

For more detailed information, please download our *Professional Guide to Requirements and Procedures for OWTS* at:
http://publichealth.lacounty.gov/eh/docs/ep_lu_OWTS_ReqAndProc.pdf

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COUNTY OF LOS ANGELES
Public Health

REQUIRED DOCUMENTS FOR YOUR APPLICATION FOR ONSITE WASTEWATER TREATMENT SYSTEM (OWTS) REVIEW

INCOMPLETE APPLICATONS FOR OWTS REVIEW WILL NOT BE ACCEPTED

This form is to be completed/verified by a Land Use Program Representative

Required	Document / Information	Provided?	
		Yes	No
X	Application for Onsite Wastewater Treatment System Review		
X	Corresponding Fees		
X	Completed Agency Referral from Los Angeles County Department of Public Works Building and Safety Division OR Department of Regional Planning		
X	Site / Floor Plan Site/Floor plan of residence/business; Plot-to-Scale; 11" x 17"; Directional compass		
X	Plot Plan Plot plan of overall property; Include encroachments/easements; Plot-to-Scale; 11" x 17"; Directional compass		
	Feasibility Report Must include qualified professional stamp and signature; Detailed information regarding feasibility report requirements may be found in our *Professional Guide to Requirements and Procedures for OWTS*		
	Grading Plan Required if grading is required on the property		
	Cross Sectional View Required when proposing to install a new/replacement dispersal system		
	Proof of Potable Water Source / Water Quality Detailed information regarding Proof of Potable Water Source/Water Quality requirements may be found in our *Professional Guide to Requirements and Procedures for OWTS*		
	System Evaluation Report Required for projects with no OWTS verification or an OWTS that is 15 years or older		
	Tank Specifications Required for septic tank replacements		
	Calibration Certificate Required for water meter used during the percolation test of a seepage pit		
	Other:		
	Other:		

For more detailed information, please download our *Professional Guide to Requirements and Procedures for OWTS* at:
http://publichealth.lacounty.gov/eh/docs/ep_lu_OWTS_ReqAndProc.pdf

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COUNTY OF LOS ANGELES
Public Health

ONSITE WASTEWATER TREATMENT SYSTEM (OWTS) REVIEW – SERVICE FEES

ONSITE WASTEWATER TREATMENT SYSTEM – TYPE OF SERVICE **All projects require: Completed Building and Safety Agency Referral Form, Floor Plan (Plot-to-Scale), Site/Plot Plan (Plot-to-Scale)**	**FEE**
PROJECT REVIEW ☐New System ☐Replacement System ☐Activating/Testing 100% FEA ☐Other	
☐ 4301 Conventional Wastewater Treatment System REQUIRED DOCUMENTS (include, but are not limited to): Feasibility Report, Tank Specifications, Proof of Water Source	$1528.00
☐ 4302 Non-Conventional Wastewater Treatment System REQUIRED DOCUMENTS (include, but are not limited to): Feasibility Report, Advanced Treatment Specifications, Maintenance Agreement with Certified Installer, Covenant and Agreement, Proof of Water Source	$1986.00
SYSTEM EVALUATION ☐Tank Replacement ☐Addition of Building/Structure ☐Expansion of 10% or less ☐Other	
☐ 4303 Without Verification of Prior System Approval REQUIRED DOCUMENTS (include, but are not limited to): Tank Specifications, System Evaluation by Licensed Contractor	$522.00
☐ 4304 With Verification of Prior System Approval REQUIRED DOCUMENTS (include, but are not limited to): Approved OWTS Records, System Evaluation by Licensed Contractor (if system is more than 15 years old)	$447.00
POST-COASTAL COMMISSION APPROVAL	
☐ 4305 Conventional or Non-Conventional Wastewater Treatment System REQUIRED DOCUMENTS (include, but are not limited to): Copy of Coastal Development Permit with All Restrictions	$451.00
PRE-COASTAL COMMISSION APPROVAL	
☐ 4306 Conventional Wastewater Treatment System	$1528.00
☐ 4307 Non-Conventional Wastewater Treatment System	$1936.00
ADDITIONAL REVIEW and/or INSPECTION	
☐ 7422 EHS III / EHS IV Hourly Rate (e.g. Third (3rd) Submittals, Site Revisits, Approved Plan Extension Review, Graywater Dispersion Field, Percolation Evaluation, etc.)	NO. OF HOURS: _____ @ $167.00/HR $_____

Applications are nontransferable. Allow **twenty (20) business days** for work plan review and response.
Field personnel cannot accept payments. **DO NOT SEND CASH.**
Make checks or money order payable to: **LOS ANGELES COUNTY DEPARTMENT OF PUBLIC HEALTH**

WORK SITE ADDRESS	
CITY / ZIP	
ASSESSOR PARCEL NUMBER (APN)	
EMAIL CORRESPONDANCE TO	

FOR OFFICE USE ONLY						
	Tigran Khachatryan (626) 430-5389 tkhachatryan@ph.lacounty.gov		Bitania Girma (310) 338-3226 bgirma@ph.lacounty.gov	NEW	REPLACEMENT	SR ENTERED BY / DATE REC'D:
	Chris Gibson (661) 287-7018 chgibson@ph.lacounty.gov		Kenneth Mattison (661) 471-4842 kmattison@ph.lacounty.gov	REMODEL FEA	SOLAR	PAYMENT REC'D BY / DATE REC'D:
	Veronica Aranda (818) 880-3411 varanda@ph.lacounty.gov		Lucero Arellano (626) 430-5379 lucarellano@ph.lacounty.gov	RESUBMISSION	FAILURE	CHECK NO.:
				COASTAL NORTH AREA	FIRE	SERVICE REQUEST/INVOICE #:

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APPLICATION FOR ONSITE WASTEWATER TREATMENT SYSTEM (OWTS) REVIEW

ALL FIELDS ARE REQUIRED. INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED.

WORK SITE ADDRESS	CITY	ZIP CODE
APN	B&S PLAN CHECK NO. (found on B&S Agency Referral) OR DRP PROJECT NO.	

DESCRIPTION OF PROJECT (E.G. NEW RESIDENCE, POOL ADDITION, ADDITION TO RESIDENCE, TANK REPLACEMENT, FIRE REBUILD, ETC.)

PROPERTY OWNER(S) NAME	PROPERTY OWNER(S) REPRESENTATIVE	
ADDRESS (CHECK HERE IF SAME AS WORK SITE ADDRESS ☐)	CITY	ZIP CODE
EMAIL	TELEPHONE	MOBILE

Qualified Contractor – Required for Installation of OWTS

CONTRACTOR LICENSE HOLDER NAME	CONTRACTOR QUALIFICATION (PLEASE SELECT ALL THAT APPLY) ☐ CLASS A ☐ CLASS B ☐ C-42 ☐ C-36	CONTRACTOR LICENSE NUMBER
ADDRESS	CITY	ZIP CODE
EMAIL	TELEPHONE	MOBILE

Qualified Professional – Required for feasibility studies/reports and new/replacement OWTS design

QUALIFIED PROFESSIONAL NAME AND TITLE	AGENCY	LICENSE NUMBER
ADDRESS	CITY	ZIP CODE
EMAIL	TELEPHONE	MOBILE

Applications are nontransferable. Allow **twenty (20) business days** for work plan review and response.
Field Personnel cannot accept payments. **DO NOT SEND CASH.**
Make checks or money order payable to: **LOS ANGELES COUNTY DEPARTMENT OF PUBLIC HEALTH**

APPLICATION AND REQUIRED SUPPORTING DOCUMENTS:
Submit one (1) electronic copy to: dlanduse@ph.lacounty.gov and
Attach one (1) hard copy of all supporting documents.
Please note:

- The Application for OWTS Review will not be processed until all required copies are received.
- In accordance with the California Public Records Act, all documents submitted for the purpose of obtaining permits from a public agency are public records and will be disclosed when specifically requested by the public.

PROJECT APPROVALS ARE CONTINGENT UPON COMPLIANCE WITH ALL THE REGULATIONS, ORDINANCES, AND LAWS OF THE STATE OF CALIFORNIA, THE COUNTY OF LOS ANGELES, THE DEPARTMENT OF PUBLIC HEALTH, AND THE ENVIRONMENTAL HEALTH LAND USE PROGRAM.