
Department Policy:

For outbuildings, sheds, swimming pools, decks, and remodeling or building additions, a private sewage system evaluation will be conducted to insure the existing sewage system is operating properly and to insure that minimum setback distances are being maintained to the existing private sewage system.

An increase in wastewater load occurs when the remodeling or building addition creates an increase in the number of bedrooms for a residence, or an increase or change of use occurs at a commercial building. If an increase in wastewater load occurs, a thorough evaluation of the existing private sewage system, including soil tests, verification of septic tank capacity, identification of a replacement system area, etc. may become necessary.

Please contact the Environmental Health Division for rules concerning POWTS evaluations for public buildings that are served by a POWTS, or for the reconstruction of a structure that has been damaged by fire, wind, or other manmade or natural disaster wind, or other manmade or natural disaster. and, or other manmade or natural disaster

An application, appropriate fees, description of the proposed improvement and plans must be submitted to the Waukesha County Environmental Health Division before a PSE evaluation will be conducted.

To discuss proposed building additions, remodeling plans or proposed improvements to the property, please contact the Waukesha County Environmental Health Division staff at 262-896-8300 between the hours of 8:00 am - 4:30 pm Monday thru Friday.

E24-01/2017

Preliminary Site

Evaluation

(PSE)



Applicable to Properties Served
by a Private Onsite Wastewater
Treatment System (POWTS)

Waukesha County
Department of Parks and Land Use
Division of Environmental Health
515 W. Moreland Blvd., AC 260
Waukesha, WI 53188-3868

www.waukeshacounty.gov/eh
Tel. (262) 896-8300 Fax (262) 896-8298

This pamphlet is intended to briefly explain this Department's policy pertaining to Preliminary Site Evaluations of structures served by a Private Onsite Wastewater Treatment System. (POWTS)

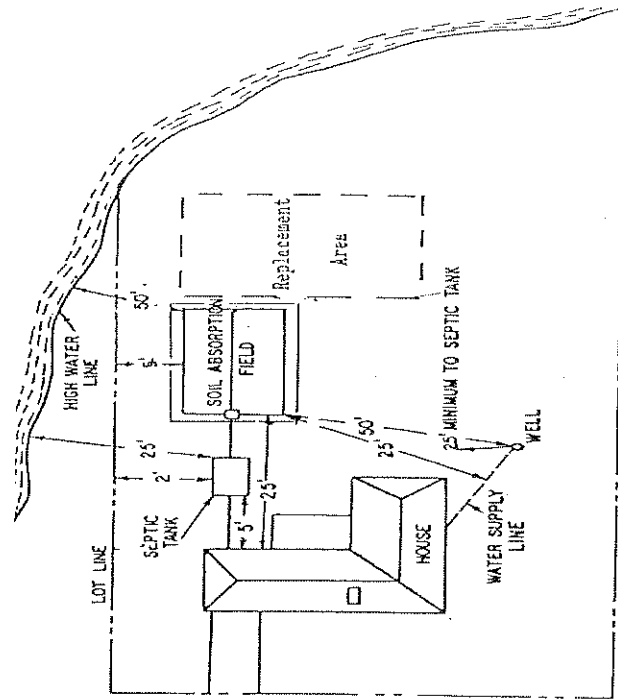
On April 24, 1978, Wisconsin State Statutes 66.036 was enacted requiring a property owner to obtain a sanitary permit prior to the issuance of a building permit for proposed buildings which would be served by a POWTS. Also enacted were rules prohibiting the issuance of a building permit for the construction of a structure on a property served by a POWTS until it is shown that the proposed improvement would not interfere with the existing, functioning POWTS.

In November 1981, this Department adopted a policy to review building improvements on structures served by POWTS prior to the issuance of a building permit.

On July 1, 2000, a major revision to COMM 83 Wisconsin Administrative Code (WAC) was implemented. Under the provisions of COMM 83, administrative rules address POWTS systems for new construction, construction affecting wastewater flow, setback distances and evaluation of existing POWTS. The evaluation of existing POWTS prior to the issuance of a building and/or zoning permit is performed by the Environmental Health Division to insure the existing POWTS complies with COMM 83 Wisconsin Administrative Code provisions.

Effective January 1, 1994, the Waukesha County Department of Parks and Land Use initiated a fee to help offset costs associated with the PSE program. The fee schedule is as follows:

<u>Improvement Type:</u>	<u>Fee Category:</u>
Swimming Pool, Outbuilding, Wood Deck, Pole Building, Barn, Shed .	Option A
Building Addition and/or Remodeling. No bedroom addition or increase in wastewater load.	Option B
Building Addition and/or Remodeling that will result in an increase in number of bedrooms or an increase or change of use for a commercial building.	Option C



Example of drawing to be attached for proposed improvement.

For building improvements on properties served by a POWTS, the following isolation distances must be maintained in order to comply with COMM 83 Wisconsin Administrative Code requirements.

Minimum Isolation Distance Requirements

Proposed Improvement	Min. To Treatment Tank	Min. To Absorption Cell
-Concrete Slab-Floating or with frost footing that is not connected to the building	Access to the treatment tank and components shall be provided	Cannot be located over absorption cell
-Concrete Slab-With frost footing that is attached to the dwelling	Access to the treatment tank and components shall be provided	Cannot be located over absorption cell
-Wooden Deck-Constructed with or without concrete or wood pilings	5 Feet	10 Feet
Attached or detached garage on slab or with slab and frost footing	5 Feet	10 Feet
-Swimming Pool-Above or below ground	5 Feet	15 Feet
Habitable slab constructed building	5 Feet	10 Feet
Screened in porch with roof	5 Feet	10 Feet
Porch with combination windows and roof	5 Feet	10 Feet
Building addition with crawl space and/or basement	5 Feet	10 Feet
Building addition on slab	5 Feet	10 Feet

Preliminary Site Evaluation Application

Waukesha County Department of Parks & Land Use, Environmental Health Division
515 W. Moreland Blvd., Room AC260 Waukesha, WI 53188 262-896-8300 FAX: 262-896-8298

Date:	Name of Property Owner:		
Property Location:			City, Town, Village of:
Telephone: Home#:	Work#:	Contractor Name:	
Mailing Address & Zip:			Phone: FAX:

Improvement Description:

(Indicate the Improvement Option that applies – “A”, “B” or “C”)

Option A – Please check from the list below:

() Swimming Pool () Wood Deck () Pole Building () Outbuilding () Garage () Other

Attach survey, blueprints or plans to this application showing the dimensions and location of the proposed improvement on the property.

Option B

() **Building Addition and/or remodeling**
No change in number of bedrooms

Provide a description of the building and/or remodeling project.

() **Land Division:**

Creation of new land parcels that include an existing building served by a private sewage system.

Provide a survey showing the proposed land division, building location and the location of septic tank and soil absorption areas.

Option C

() **Residential:** Building Addition and/or remodeling that will result in an increase in number of bedrooms.

Existing number of bedrooms: _____

Proposed number of bedrooms: _____

Provide a description of the building and/or remodeling project. Attach a survey, blueprints and/or plans of the proposed improvement or development to this application.

() **Public/Commercial:** Building addition and/or remodeling that will result in an increase, decrease or change of building use or operation. Please check the appropriate box below:

Increase in Building Usage: Same Usage:

Decrease in Building Usage: Change of Use:

* May require a soil test pit and profile evaluation to determine whether the existing private sewage system is in an area having a high water table or bedrock condition. Assuring proper siting and installation of private sewage systems will help prevent contamination of groundwater. **If the soil profile evaluation shows that the private sewage system is installed in unsuitable soils, it is understood that a code complying private sewage system shall be ordered installed regardless of whether a building permit is issued.**

Private sewage systems that are “failing” by discharging sewage to the ground surface or backing up into the building will be ordered replaced with a code complying private sewage system.

By signing this form, I state that I am the property owner; I have read the above statement and agree to its conditions. I also give permission for a Waukesha County representative to enter my property to determine that the proposed improvement complies with Comm. 83, Wisconsin Administrative Code and Waukesha County Sanitary Ordinance.

Printed Name of Property Owner

Property Owner Signature

FEES: To be submitted with application	Make Checks Payable to: “Waukesha County”	For Department Use Only:
Option “A” \$50.00	For improvements or remodeling projects involving more than one category, the fee will be based on the greater amount.	Received By: _____
Option “B” \$65.00		Date Received: _____
Option “C” \$80.00		Fees Due: _____
		Fees Paid: _____