

**BUCKS COUNTY DEPARTMENT OF HEALTH  
DIVISION OF ENVIRONMENTAL SANITATION  
ON-SITE SEWAGE DISPOSAL REPAIR FORM**

**Make check or money order payable to:** Bucks County Department of Health

**Mail check and Repair Form to:** Bucks County Department of Health  
Neshaminy Manor Center  
12821 Almshouse Road  
Doylestown, PA. 18901

Fee: See Current Fee Schedule

Fee Submitted:  YES  NO

Amount \$ \_\_\_\_\_

Tax Parcel Number: \_\_\_\_\_

Municipality: \_\_\_\_\_

Site Location: \_\_\_\_\_

Property Owner: \_\_\_\_\_

Name

Street

City/Town

State

Zip

**IF APPLICANT IS OWNER IN EQUITY, A COPY OF THE AGREEMENT OF SALE MUST BE SUBMITTED**

Telephone: Home \_\_\_\_\_ Work \_\_\_\_\_

Signature of Property Owner: \_\_\_\_\_

What is the purpose of this repair request: \_\_\_\_\_

**NOTE: This repair form is a request for a site investigation and not to be construed as a permit application for installation of a repair.**

A scaled Plot Plan (1 inch = 100 feet) of the property must be submitted with this form, and must include the following:

1. Property lines
2. Existing well and all neighbors' well
3. Existing buildings and structures
4. Existing components of on-lot septic system, if known.
5. Existing driveway, right-of-ways

**NOTE: If a copy of a permit (original or repair) of the existing on-site septic system, issued by the Bucks County Department of Health, is available, it must be submitted along with this form.**

**BUCKS COUNTY DEPARTMENT OF HEALTH  
DIVISION OF ENVIRONMENTAL SANITATION  
ON-SITE SEWAGE DISPOSAL REPAIR EVALUATION**

**PROPERTY OWNER RESPONSIBILITY**

In order for the Bucks County Department of Health (BCDH) to evaluate your malfunctioning on-site sewage disposal system and provide you with a repair alternative, the following items are your responsibility to provide for the evaluation:

- 1.) The following items must be staked on your property:
  - a.) Property lines.
  - b.) Water supply(s) on your parcel and within 100 feet of your parcel.
  - c.) Sewage disposal system(s).
- 2.) Contact the appropriate Sewage Enforcement Officer (SEO) at the BCDH to schedule a site evaluation by mailing the attached request form and fee.
- 3.) The following items must be provided for the scheduled site evaluation.
  - a.) Item # 1 above.
  - b.) Uncovering of the following (if they exist):
    - 1.) Manhole and inlet/outlet baffle ports on the septic tank(s).
    - 2.) Distribution box(s).
    - 3.) Header distribution pipe in a system without a distribution box.
  - c.) A BCDH licensed sewage hauler. **Hauler must not commence any pumping of the system until instructed by the SEO.**
  - d.) A fifty (50) foot plumber's snake.
  - e.) A backhoe and operator.
  - f.) The property owner **must** be present for the site evaluation. **The site evaluation shall be canceled by the Department if the property owner is not present.**
  - g.) Prior to any soil testing being conducted at the site(s) the requester or contractor must obtain a PA One Call System, code serial number: # \_\_\_\_\_.

TO LOCATE ANY UNDERGROUND UTILITIES  
CONTACT PA ONE CALL SYSTEM, INC.

1-800-242-1776

**\*\*NOTE: THE ATTACHED AUTHORIZATION FORM MUST BE COMPLETED BY THE CONSULTANT AND SUBMITTED ALONG WITH THIS REQUEST FORM.**

This Section of the form is to be completed by the Consultant contracted by Owner

We acknowledge that all testing to be conducted on the aforementioned parcel  
TM# \_\_\_\_\_ will meet all applicable isolation distances and slope  
requirements of Act 537 and Chapters 71, 72 and 73.

\_\_\_\_\_  
Consultant Name                      Authorized Representative                      Date