



STATE OF ALASKA
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DOCUMENTATION OF CONSTRUCTION

18 AAC 72.035(d) allows conventional onsite wastewater treatment and disposal systems that serve a single family home, a duplex or a small commercial facility to be installed without prior plan approval by the Department, if the system is installed by a certified installer or under the direction of a registered engineer. Approved Homeowners may install conventional onsite systems serving their own home or duplex, provided they meet certain requirements. For those systems installed under 72.035(d), this form must be completed and submitted to the Department within 90 days of completing construction. In addition to this form, other information must be submitted

Additional submission requirements for all installations:

1. A copy of the as-built survey (if available);
2. A well log (if available);
3. Engineer's test hole log and percolation test results if a percolation test is required because of soil type;
4. Sand liner material approval if a sand liner was installed.

Additional submittal requirements for Certified Installers:

1. Photographs of the installation in accordance with the Installer's Manual.

Additional submittal requirements for Approved Homeowners:

1. Photographs of the installation in accordance with the Installer's Manual.
2. Record of a soil classification from a soil testing lab or a letter from a registered engineer who rated the receiving soil.
3. Copy of letter from ADEC confirming that the installer has attended the required Department training.

Additional submittal requirements for systems with construction observation by an engineer.

1. Record drawings sealed and signed by a civil engineer registered in the State of Alaska.
2. The Documentation of Construction Form must be sealed and signed by the observing engineer.

This construction documentation form with the applicable attachments should be submitted to the nearest local office of the Department of Environmental Conservation. Notification lines shown below are for certified installers use to notify ADEC of a planned installation.

Juneau
907-465-5350

Ketchikan
907-465-5350

Fairbanks
907-451-2360
Notification Line 907-451-2184

Kenai
907-262-3402
Notification Line 907-262-3424

Mat-Su Valley
907-376-1871
Notification Line 907-376-5139

Anchorage
907-269-7500
Notification Line 907-269-6285

Chapter 72, Wastewater Treatment and Disposal Regulations, the Installer's Manual and this form may be found on the Department's Home Page at <http://dec.alaska.gov/water/wwdp/onsite/index.htm#>

Date Received	State of Alaska Department of Environmental Conservation Documentation of Construction	ADEC Review Date and Initial
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Part I. General Information

Legal Description	
Street Address	Tax/Parcel ID#
Submitted By	<input type="checkbox"/> Registered Engineer <input type="checkbox"/> Approved Homeowner <input type="checkbox"/> Certified Installer No.
Installer Name Mailing Address, Email, & Phone	

Part II. Wastewater Disposal

Onsite Wastewater System Serves	<input type="checkbox"/> Single Family # of bedrooms _____ <input type="checkbox"/> Duplex Total # of bedrooms _____ <input type="checkbox"/> Small Commercial Facility with Estimated Design Flow of less than 500 gpd. – <u>show calcs below</u>		
<input type="checkbox"/> New System <input type="checkbox"/> Repair / Replace Existing Components (describe): _____			
System Installed By:	<input type="checkbox"/> Certified Installer <input type="checkbox"/> Registered Engineer <input type="checkbox"/> Inspection by a Registered Engineer <input type="checkbox"/> Approved Homeowner (attach approval letter)	Installation Notification Date	
		Date Installed	
Septic Tank	Size _____ # of Compartments _____ Material _____	Manufacturer _____ Lift Station Manufacturer _____ Alarms <input type="checkbox"/> Yes <input type="checkbox"/> No	
Type of Soil Absorption System	<input type="checkbox"/> Deep Trench <input type="checkbox"/> Shallow Trench <input type="checkbox"/> Seepage Pit <input type="checkbox"/> Bed <input type="checkbox"/> Mound <input type="checkbox"/> Infiltrators (# of Units _____ Unit Area _____ sq. ft.) <input type="checkbox"/> Other _____		
Soils	Classification _____	Rating - sq ft/bedroom _____	
Soil Absorption Area	Field Dimensions (Length _____ ft Width _____ ft Thickness/Depth of Rock _____ ft)		
	Effective Absorption Area _____	Size of Rock _____	
Perc Test Results	Minutes per Inch _____	Application Rate _____ sq ft / bedroom	
	Performed By _____	(Attach results – sealed and signed by a registered engineer)	
Ground Cover Over	Septic Tank _____ ft	Absorption Area _____ ft	Sewer Pipes _____ ft
	Insulation Thickness _____ in	Insulation Thickness _____ in	Insulation Thickness _____ in
Cleanout Pipes/Caps	# Cleanout(s) _____	# Septic Tank Vents _____	# of Leach Field Monitor Tubes _____
Separation Distances from septic tank or absorption area, whichever is closest, to <u>all</u> nearby Public drinking water sources _____ ft. Class _____ Private drinking water sources _____ ft Nearest water bodies (see 18 AAC 72.020(b)) _____ ft Lot Line _____ ft			
Separation Distances from OnLot Sewer Lines to Drinking Water Sources - Public		Private	
Separation Distances from Bottom of Distribution Rock to - Groundwater Table		Impermeable Soils	
Separation Distance from Absorption Area to Slope exceeding 25%			
Comments / Recommendations / Criteria used to size commercial facility:			Seal Registered Professional Engineer
I certify that the above information, and that provided in Section III, is correct:			
Signature _____		Printed Name _____	
Title, Reg/Cert No, Inst No. _____		Date _____	

NOTE: Must be signed by a Certified Installer, DEC staff or Approved Homeowner. If engineering seal bears printed name, registration number and is signed, those blocks need not be completed for engineered submittals. Do not modify this form.

**Rectangular DIAGRAM OF SYSTEM(S)
INSTRUCTIONS FOR DIAGRAM**

1. In a PLAN VIEW, locate and identify each of the following:

- | | | | |
|--|-----------------------|---|---|
| Well | All Structures | Septic Tank | Soil Absorption System |
| Surface Water | Test hole location(s) | Property Line | <i>(Include dimensions)</i> |
| Closest well on adjacent property | | Closest septic tank on an adjacent property | |
| Closest edge of an absorption field on adjacent property | | All cleanouts and monitor tubes | Slopes greater than 25% and 10' or more high. |

2. Show distances between the well and each part of the onsite system listed in 1.

3. Show distances between water bodies and each part of the onsite system listed in 1.

4. In a CROSS SECTION VIEW of the soil absorption area, identify each component and show the depth (thickness) of the following:

- | | | | | | |
|----------------|---|-------------|---------------------|----------------|------------|
| Soil Cover | Absorption Material | Water Table | Bedrock/impermeable | Discharge pipe | Insulation |
| Original Grade | Final Grade (include if original & final grade are different) | Height | Depth | | |

TESTHOLE LOG

Legal Description: _____

Date: _____

Inspected By: _____

Ground level

1ft

2ft

3ft

4ft

5ft

6ft

7ft

8ft

9ft

10ft

11ft

12ft

13ft

14ft

15ft

16ft

17ft

18ft

19ft

20ft

Testhole Location Map

Comments:

Total Depth of Testhole _____ ft.

Groundwater/Seeps Encountered? Y / N At _____ ft.

Impermeable Soil (Silt/Clay/Bedrock) Encountered? Y / N At _____ ft.

IV. WATER SUPPLY SYSTEM					(SECTION IV IS OPTIONAL)					
Source of Water and Containment (Check all that Apply)			Type of Water Supply System		Treatment of Water (Check all that Apply)					
<input type="checkbox"/> Well (Drilled or Driven)	<input type="checkbox"/> Surface (Identify) _____		<input type="checkbox"/> SF/Duplex	<input type="checkbox"/> None					<input type="checkbox"/> Chlorination	
<input type="checkbox"/> Roof Catchment	<input type="checkbox"/> Other (Identify) _____		<input type="checkbox"/> Public	<input type="checkbox"/> Filtration			<input type="checkbox"/> Mineral Removal			
<input type="checkbox"/> Holding Tank				<input type="checkbox"/> Other: _____						
Well Data			Is the height of the well casing more the 12" above the ground?		<input type="checkbox"/> Yes <input type="checkbox"/> No					
			Is a sanitary seal or well cap installed on the well casing?		<input type="checkbox"/> Yes <input type="checkbox"/> No					
			Is drainage directed away from or around the casing within a radius of 10 feet of the well casing?		<input type="checkbox"/> Yes <input type="checkbox"/> No					
			Is well wire enclosed in conduit?		<input type="checkbox"/> Yes <input type="checkbox"/> No					
Date Drilled	Depth of Well (Feet)		Static Water Level (Feet)		Yield (If available)		Pump Rate (If available)			
Separation Distance from the Well Casing to each of the Following Sources of Contamination:										
Septic/Holding Tank on Lot			Sewer Lines on Lot		Absorption Area on Lot					
Feet			Feet		Feet					
Closest Septic/Holding Tank on Adjacent Lot			Closest Sewer Lines on Adjacent Lot		Closest Edge of an Absorption Area on Adjacent Lot:					
Feet			Feet		Feet					
Indicate separation distance from toxic materials including fuel tanks, paints, lubricants and other petroleum based materials, pesticides, fungicides or herbicides to well casing:					On Lot		On Adjacent Lot			
					Feet		Feet			
Water Sample Taken by: (Name)					Sampler is:					
Address					<input type="checkbox"/> Buyer		<input type="checkbox"/> Engineer			
					<input type="checkbox"/> Banker		<input type="checkbox"/> Government Official			
Water Sample Results:										
Attach Copy			<input type="checkbox"/> Satisfactory - Date			<input type="checkbox"/> Unsatisfactory - Date				
Comments/Recommendations:										
I certify that the above information, and that provided in Section IV, is correct:										
Signature			Typed/Printed Name		Title		Date			

Note: 1. This section should be signed by a Certified Installer, Professional Engineer, DEC staff, or Owner/Builder
2. All public water systems must receive ADEC plan approval prior to construction. See 18 AAC 80 State of Alaska Drinking Water Regulations for specific requirements.