Charlie Crist
Governor

Ana M. Viamonte Ros, M.D., M.P.H.
State Surgeon General

OKALOOSA COUNTY HEALTH DEPARTMENT

810 JAMES LEE BLVD. E
CRESTVIEW, FL 32539
850-689-7859 EXT 1301

221 HOSPITAL DRIVE NE
FT. WALTON BCH., FL 32548-5066
850-833-9247

EXISTING SEPTIC SYSTEM AND MODIFICATION PERMIT REQUIREMENTS

1) **COMPLETED APPLICATION PACKAGE.**

2) **COMPLETED PUMP OUT CERTIFICATE.**

3) **COPY OF PLOT PLAN AND LEGAL DESCRIPTION. (lot and block and property ID number)**

   A. **5 acres or less drawn to scale showing the location of the septic tank, drainlines, and all obstructed areas with dimensions.**
   B. **If more than five acres, two drawings are required. One to show property layout and dimensions (not to scale) and the other to show one acre drawn to scale with all obstructed areas with dimensions. Note: the drawings of the entire property must indicate where the one-acre shown in drawing 2 is located.**

   NOTE: USE AN APPROPRIATE SCALE OF 1"-10'; 1"–20'; 1"-30'; 1"-40'; 1"-50' or 1"-60'. ANY OTHER SCALES WILL NOT BE ACCEPTED. BE SURE THE SCALE IS NOTED ON THE SITE PLAN. ANYONE IS WELCOME TO USE OUR ENGINEER RULERS. PLOT PLANS LARGER THAN 11 X 17 WILL NOT BE ACCEPTED.

4) **WATER USAGE FOR PREVIOUS 12 MONTHS, 24 MONTHS FOR COMMERCIAL.**

5) **FLOOR PLANS FOR PROPOSED ADDITION/NEW HOME AND EXISTING STRUCTURE. FLOOR PLANS DO NOT HAVE TO BE TO SCALE BUT MUST SHOWN DIMENSIONS. FLOOR PLANS LARGER THAN 11X17 WILL NOT BE ACCEPTED.**

7) **SEWER NON-AVAILABILITY LETTER FROM YOUR LOCAL SEWER AUTHORITY. (CITY OF CRESTIVEW, DESTIN WATER USERS AND OKALOOSA COUNTY WATER AND SEWER ONLY)**

THE COST FOR AN EXISTING SYSTEM INSPECTION IS $145.00
SHOULD YOUR SEPTIC SYSTEM NEED TO BE MODIFIED,
A MODIFICATION PERMIT WILL BE REQUIRED.