



# Certification of Fill for Sewage Disposal Systems

*Instructions:* **Engineer** Complete Sections A through D and submit form to the Dutchess County Health Department. You may attach test result forms (e.g. HD-184) to this form. See back for further instructions.

## SECTION A. PROJECT INFORMATION

Subdivision or project name \_\_\_\_\_ Lot Number \_\_\_\_\_  
 Tax Map # \_\_\_\_\_ Filed Map # \_\_\_\_\_ Location \_\_\_\_\_  
 (T,V,C)

## SECTION B. PERMEABLE FILL

Length \_\_\_\_\_ Width \_\_\_\_\_ Depth \_\_\_\_\_ Has fill been stabilized? Yes No.  
 Is fill in location shown on map? Yes No. Finished slope of pad \_\_\_\_\_ Soil Type \_\_\_\_\_  
 Is there an indication that the SDS area has been regraded or otherwise disturbed prior to the placement of the fill?  
Yes No. Explain: \_\_\_\_\_  
 Adequate quality? Yes No. Method of determination \_\_\_\_\_

## SECTION C. IMPERVIOUS FILL

Soil Type \_\_\_\_\_ Adequate amount? Yes No. Side slope \_\_\_\_\_  
 Is there adequate separation from the toe of slope to the property line? Yes No  
 Adequate quality? Yes No. Method of determination \_\_\_\_\_

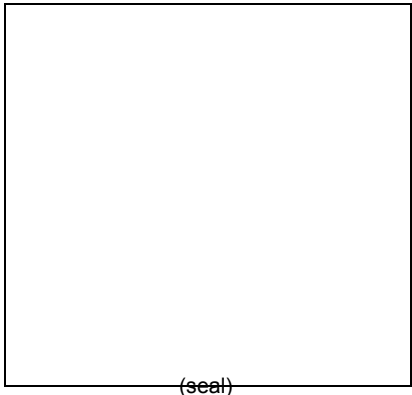
## SECTION D. CERTIFICATION

I, \_\_\_\_\_, hereby certify that the above statements are correct and that to the best of my knowledge and in my professional opinion the installation of the sewage disposal fill pad has been completed satisfactorily in conformance with the approved plan.\*

Inspection dates: \_\_\_\_\_

\_\_\_\_\_  
 (Signature) (Date)

License No. \_\_\_\_\_



\*Any deviations from the approved plan must be listed and justified on the back of this form.

### For Office Use Only

Reviewed by \_\_\_\_\_ Date \_\_\_\_\_

Comments:

**Directions:**

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**By field.**

**SECTION A**

Subdivision/Project Name: Use approved name; do not use marketing names.

Lot Number: If present. Some individual lots may not have a number. Do not use mailing address numbers.

Tax Map Number: For the exact lot; do not use the parent parcel or original subdivision number.

Filed Map Number: If available. Some individual lots may not be filed.

Location: Town, Village, or City. Do not use post office.

**SECTION B**

Length, Width, and Depth: of the permeable fill. Measure top of pad.

Is fill stabilized: Was fill placed in lifts, compacted, or otherwise allowed to settle?

Soil Type: Use standard USDA terms.

Indication of regrading: Note any scarification which was performed.

Method of Determination: How did you determine that the fill was satisfactory? Possible tests include NY Standard Percolation test, various modified percolation tests, sieve tests, constant or varying head permeability tests. Enclosing the test results is optional. NY Standard Percolation tests should be done according to our published protocol and, if reported, submitted on our form HD-184 (or equivalent).

**SECTION C**

Soil Type: Use standard USDA terms.

Adequate amount: Has at least as much impervious been placed as called for upon the approved plans? Standard minimum thickness is 2 feet. Has at least enough impervious been placed to prevent break out of sewage from side slopes?

Side slope: List slope in percent, degrees, or radians. Standard minimum is 1v on 3h. Note if impervious has been keyed as per plan.

Adequate separation: Is fill installed in location shown on plan? If additional regrading was performed, is impervious still properly separated from the property line, wells, and/or wet areas? Standard distance to property lines is 10 feet.

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Comments: