

**GENERAL INFORMATION (Applicant must complete)**

<b>Name of Applicant</b>	Last	First	MI
<b>Address</b>	Street	City/Town	State Zip
<b>Contact Information</b>	Phone:	FAX:	email:
<b>Site Location</b>	Street:	City/Town	County Zip

*The following information is being submitted in support of my application for a specific waiver from compliance with one or more standards of 10NYCRR Appendix 75-A, "Wastewater Treatment Standards–Individual Household Systems".*

**1. The wastewater treatment system cannot meet the following standards of 10NYCRR Appendix 75-A:**

- Separation distances cannot be achieved (75-A.4(b), Table 2, Separation Requirements)
- Excessive Slope (75-A.4(1), Soil and Site Appraisal)
- Design is not addressed in Appendix 75-A
- Technology is not addressed in Appendix 75-A
- Other: \_\_\_\_\_

**Explain:** \_\_\_\_\_

**2. The following design is proposed to mitigate noncompliance with Appendix 75-A (brief description):** \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**3. Supporting information provided:**

- Detailed Site Plan
- Detailed Design
- Soil and Site Evaluation
- Neighboring conditions of concern (e.g., wells, waterbodies, wetlands, etc.)
- Other: \_\_\_\_\_

**Explain:** \_\_\_\_\_

I, (applicant) \_\_\_\_\_ (type or print) acknowledge that this waiver request is necessary because it is not practical for an onsite wastewater treatment system to meet the referenced standards of 10NYCRR, Appendix 75-A on this property.

\_\_\_\_\_  
 Signature Date

I, (engineer) \_\_\_\_\_ (type or print) acknowledge that this waiver request is necessary because it is not practical for an onsite wastewater treatment system to meet the referenced standards of 10NYCRR Appendix 75-A on this property. In my professional opinion, the proposed design described in this application will provide a degree of protection equivalent to the onsite wastewater treatment standard(s) that will not be met for this property and will not create an increased risk to public health or the environment.

\_\_\_\_\_  
 Signature PE License #

**\*For Health Department use only \***

Based upon the information provided in this application to waive the referenced standards of Appendix 75-A and in accordance with 10NYCRR §§ 75.3 and 75.6 (b), the waiver requested is hereby:

Approved as proposed.

Approved, with following conditions: \_\_\_\_\_

Not acted on, because additional information is required: \_\_\_\_\_

Denied, because: \_\_\_\_\_

*Note: This waiver may be revoked should any conditions considered before approving this waiver change after approval.*

\_\_\_\_\_  
 Health Department Representative

\_\_\_\_\_  
 Signature

\_\_\_\_\_  
 Date

**Instructions for Completing the Specific Waiver Application;  
Wastewater Treatment Standards–Individual Household Systems**

**Applicability:**

This Specific Waiver application form is intended for use by the applicant (property owner) or the applicant's representative (e.g., PE) to present information for consideration by the Health Department having jurisdiction to approve a new onsite wastewater treatment system (OWTS) on previously undeveloped property that does not comply with one or more standards of Appendix 75-A, "Wastewater Treatment Standards – Individual Household Systems". *A specific waiver shall be obtained before construction of the onsite wastewater treatment system.*

**Background:**

The responsible city, county, or district health office may grant a 10NYCRR Part 75 Specific Waiver from a provision(s) of 10NYCRR Part 75, Appendix 75-A, only under the following circumstances:

1. Conditions at the particular site make it impractical to comply with these standards;
2. Appropriate protective measures to mitigate noncompliance are applied;
3. The design is not likely to pose a health hazard or create environmental contamination; and
4. Disapproval will result in a significant hardship.

A Specific Waiver **IS NOT** intended as a device for routinely approving individual residential wastewater treatment systems that do not meet design standards. It is intended to provide administrative flexibility to resolve rare cases when hardships exist and/or other circumstances that make it impractical to meet Appendix 75-A standards

The Specific Waiver application shall provide information and background about the site conditions and detail the proposal so that the Health Department is able to determine whether to approve or deny the application. The Health Department representative may ask for additional information to be submitted to make that determination.

**General Information**

Provide the applicant's current mailing address and contact information. Also provide the address of the property the specific waiver is being applied for, even if it is the same as the mailing address.

**Reasons for Noncompliance**

Check the applicable reason(s) for which the waiver is requested. If not already listed, include the specific standard(s) in the space provided and provide a brief explanation. More detailed information can be attached as needed or as appropriate.

**Proposed Mitigative Design**

Provide a brief description of the site characteristics and OWTS design in the space provided. Detailed information and plans can be attached to the application.

**Supporting Information**

Check any information provided. Any additional information can be listed after "other" in the space provided. Any or all of the information listed may be required by the Health Department representative depending on the complexity of the site conditions. To obtain a waiver, the applicant must demonstrate that the onsite wastewater treatment system design proposal is acceptable and is not likely to pose a health or environmental hazard.

*Detailed Site Plan* contents may include some or all of the following: surveyed plat, accurate location of onsite and neighboring offsite (if applicable) drinking water sources or water courses, site topography, drainage features and any pertinent physical features. Appendix 75-A, Table 2, lists required separation distances.

*Detailed Design* shall be submitted by a NYS licensed P.E. and will clearly identify the OWTS components and locations.

*Soil and Site Evaluation* shall incorporate the characterization of the existing soils through, at a minimum: percolation tests and test pit evaluation, which identifies soil types and geologic limiting conditions (e.g., groundwater, rock or clay).

*Neighboring conditions of concern* (if applicable) shall include at a minimum, onsite or nearby: drinking water sources, watercourses and wetlands. Other identified possible areas of concern that could be impacted by the OWTS shall also be identified.

**Acknowledgement of Risks**

The applicant (property owner) is required to sign the Specific Waiver application and acknowledge the risks that may be associated with the OWTS serving their property. A NYS Professional Engineer (P.E.) is required to provide his or her name and license number on the form and submit the supporting information and stamped design plans on behalf of the applicant.

**Health Department Representative Response**

The Health Department representative will approve; approve with conditions; not act and request additional supporting documentation; or deny the Specific Waiver application. The determination will be sent to the applicant and a copy of the determination and all information submitted with the application will be retained.