

SITE INFORMATION
 PROPOSED NEW RESIDENCE AND POOL ON VACANT LOT
 PROPOSED 2-STORY, 7-BEDROOM RESIDENCE

TOTAL LOT AREA: 20,086 SQ.FT. (0.4611 ACRES)

LOT No. 24
 MAP OF EAST HAMPTON KNOLLS
 FILED: MAY 7, 1962; FILE No. 3561

SANITARY CALCULATIONS
 SANITARY USE: 7 DEEMABLE BEDROOM SINGLE FAMILY RESIDENCE
 MINIMUM TREATMENT SYSTEM CAPACITY: 770 GPD (SCDHS RES. STDS. TABLE 3)
 MINIMUM LEACHING CAPACITY: 475 SF (400 SF FOR 6 BEDROOMS + 75SF FOR EACH ADDITIONAL).

PROVIDE:
 INSTALL ONE (1) HYDROACTION AN800 TREATMENT UNIT (800 GPD CAPACITY PROVIDED)
 INSTALL TWO (2) 8" DIA. X 10' EFFECTIVE DEPTH LEACHING POOLS; 502 SF OF SIDEWALL AREA PROVIDED
 PROVIDE ADEQUATE SPACE FOR ONE (1) 8" DIA. X 10' DEEP EXPANSION POOL

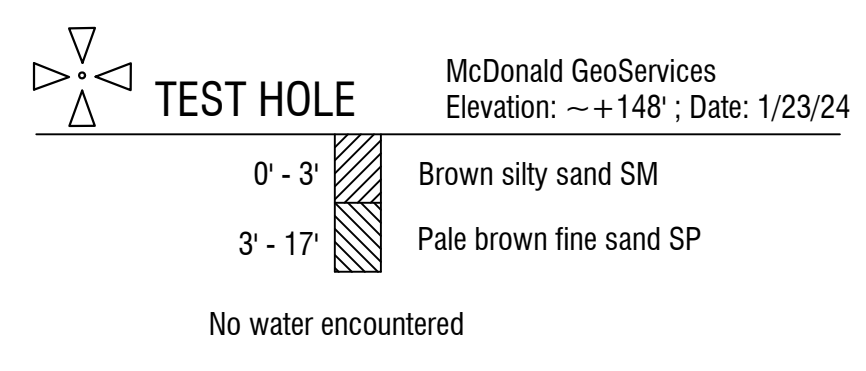
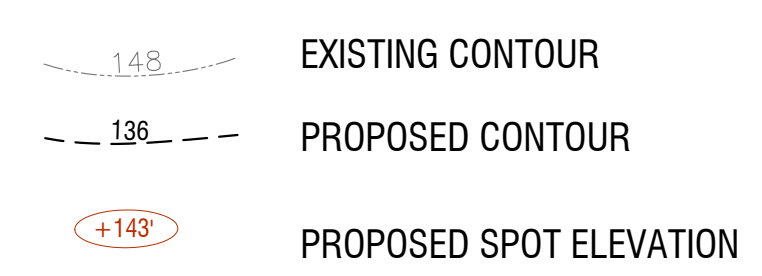
- NOTES:**
- DESIGN ENGINEER SHALL OBSERVE THE OWTS PRIOR TO BACKFILL AND DURING SYSTEM STARTUP.
 - INSTALLER SHALL VERIFY ALL INVERT ELEVATIONS PRIOR TO INSTALLATION & NOTIFY ENGINEER OF ANY DISCREPANCIES.
 - INSTALLER IS RECOMMENDED TO SCHEDULE PRE-CONSTRUCTION MEETING WITH DESIGN PROFESSIONAL BEFORE EXCAVATION OF NEW SANITARY SYSTEM.
 - INSTALLER SHALL BE RESPONSIBLE FOR SCHEDULE & COORDINATION OF SCDHS FIELD INSPECTIONS.
 - OWTS SHALL BE TESTED FOR WATER TIGHTNESS PRIOR TO ARRIVING ONSITE USING METHOD APPROVED BY MFG.
 - THE OWTS INSTALLER SHALL HOLD AN I/A OWTS ENDORSEMENT FROM SCDHS AND SHALL BE AN AUTHORIZED INSTALLER.
 - INSTALLER SHALL REGISTER THE OWTS WITH SCDHS. THE ENGINEER SHALL PROVIDE RECORD DOCUMENTS REQUIRED BY SCDHS.
 - AN EXECUTED O&M CONTRACT BETWEEN THE MAINTENANCE PROVIDER AND THE PROPERTY OWNER SHALL BE PROVIDED TO SCDHS. THE SERVICE CONTRACT SHALL BE A MIN. 3 YEARS.
 - NO SURFACE WATERS OR WETLANDS WITHIN 300 FT OF PROPERTY.
 - TEST HOLE PER "EAST HAMPTON KNOLLS" SUBDIVISION MAP.

- SANITARY SYSTEMS SHALL BE MIN 10' FROM ANY ONSITE DRY WELLS
- SANITARY SYSTEMS SHALL BE MIN 10' FROM ANY WATER SERVICES
- SEWER LINES SHALL BE MIN 5' FROM BASEMENT AREAWAYS & LIGHTWELLS
- WATER LINES SHALL BE MIN 4.5' FROM BASEMENT AREAWAYS & LIGHTWELLS
- I/A OWTS & LEACHING POOLS SHALL BE MIN 5' FROM PROPERTY LINE
- I/A OWTS SHALL BE MIN 75' FROM POTABLE WELLS
- SANITARY LEACHING POOLS SHALL BE MIN 100' FROM POTABLE WELLS
- ONSITE DRY WELLS SHALL BE MIN 50' FROM POTABLE WELLS
- UNDERGROUND LPG TANKS SHALL BE MIN 100' FROM ANY WELLS

ENGINEER'S CERTIFICATION REQUIRED.
 SUBMIT P.E. OR R.A. CERTIFICATION
 FOR INSTALLATION AND CONSTRUCTION
 OF I/A OWTS
 FOR FINAL APPROVAL.

**Water lines must be inspected by the
 Suffolk County Dept. of Health Services.**
 Call (631) 852-5754, 48 hours in
 advance, to schedule inspection(s).

**EXCAVATION INSPECTION REQUIRED
 FOR SANITARY SYSTEM
 BY HEALTH DEPARTMENT**



Sanitary Plan

Scale: 1" = 20'
 Existing property survey prepared by Steven Barylski L.S., dated 9/28/23.
 Elevations based from NAVD 1988 datum.

D.B. Bennett, P.E., P.C. | Consulting Engineer
 74 Montauk Hwy, Unit #21, P.O. Box 1442
 East Hampton, NY 11937
 631-907-0023 (T) 631-329-0324 (F)

Residence
 62 Whooing Hollow
 East Hampton, NY 11937
 SCTM No. 300-156-2-20

Site Plan

Issue
 Rev. 0 - 01.23.24
 Rev. 1 - 01.30.24
 Rev. 2 - 02.16.24

Date
 Feb. 16, 2024
 Scale
 As noted

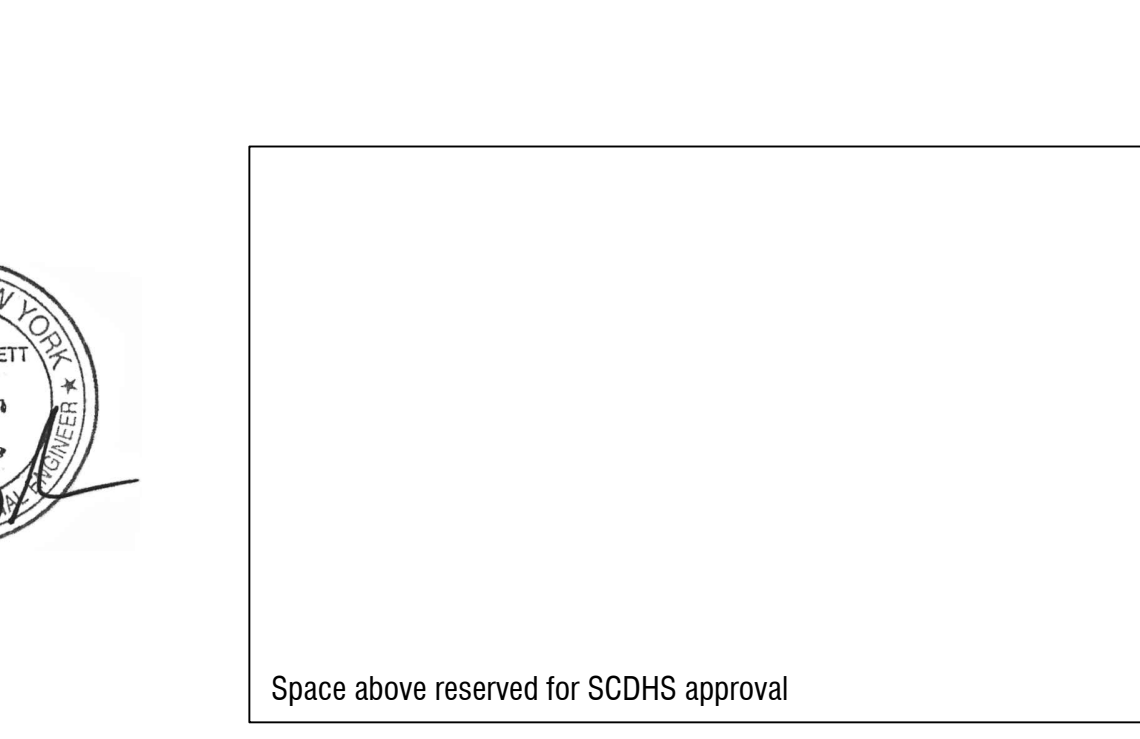
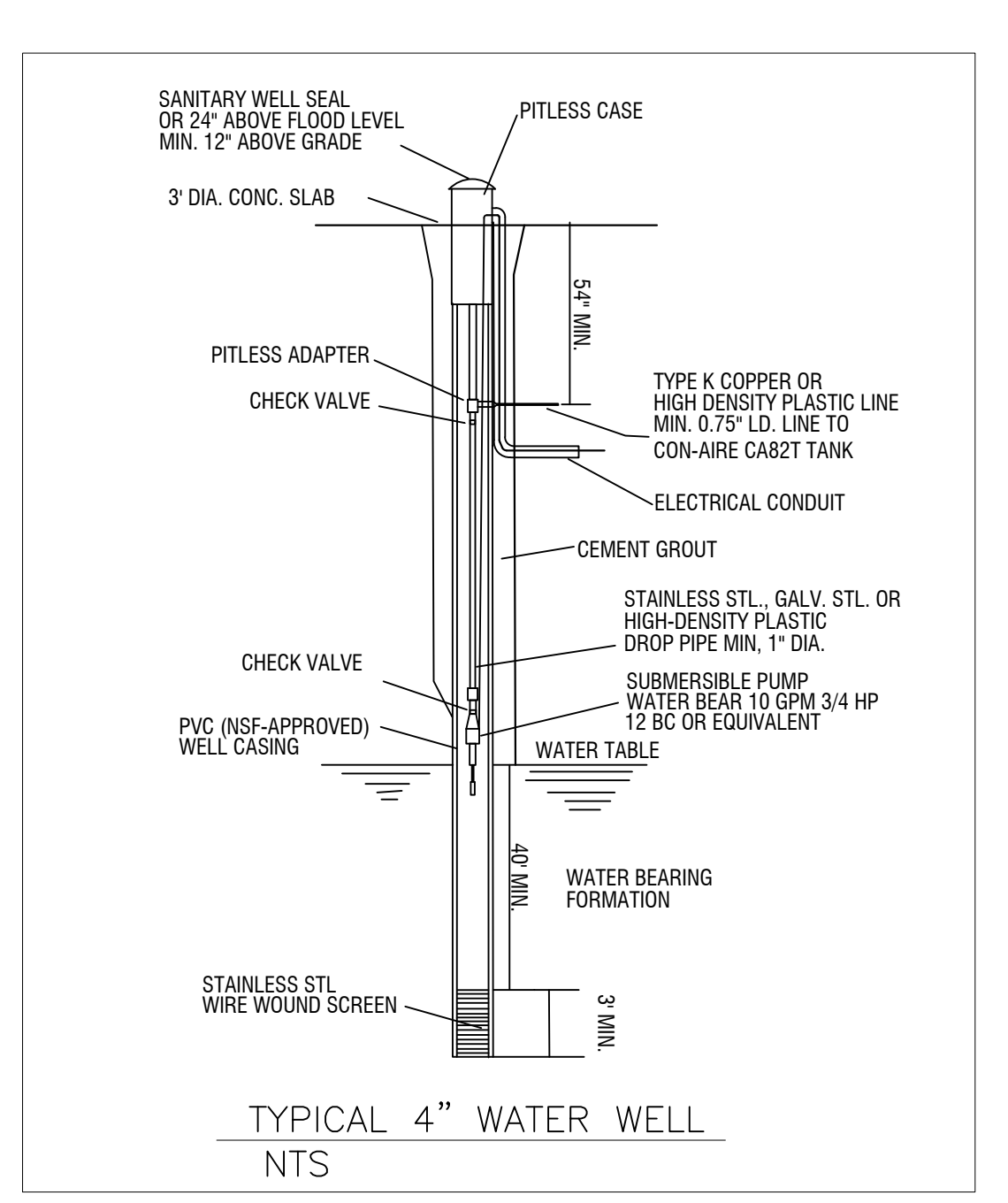
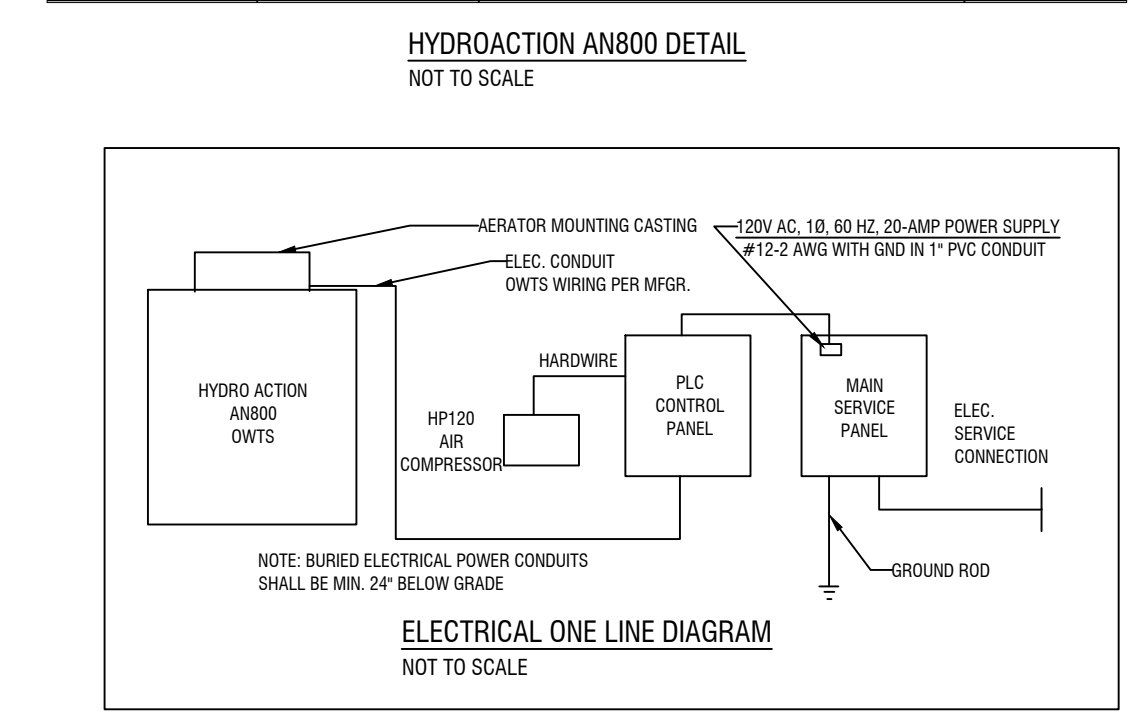
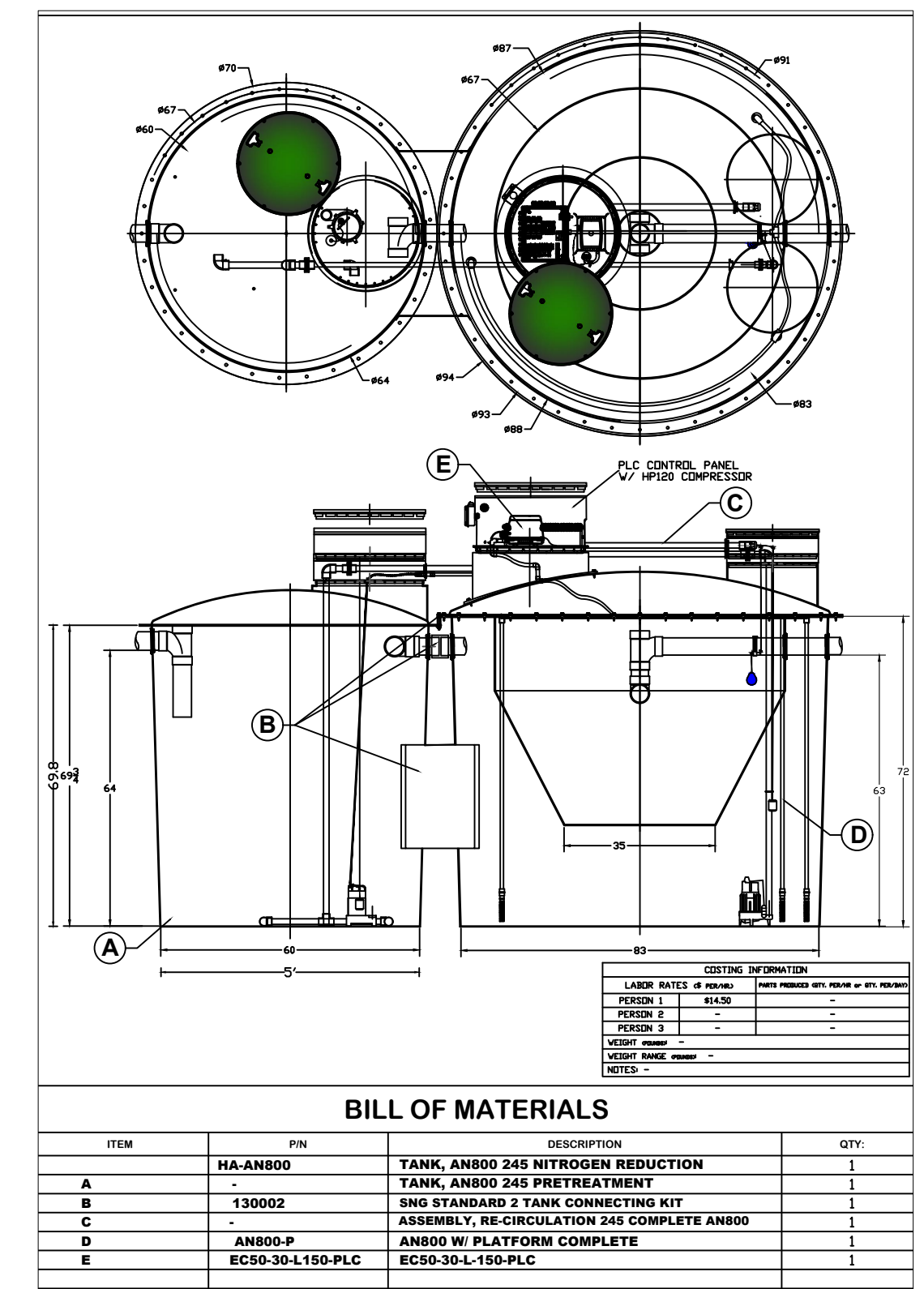
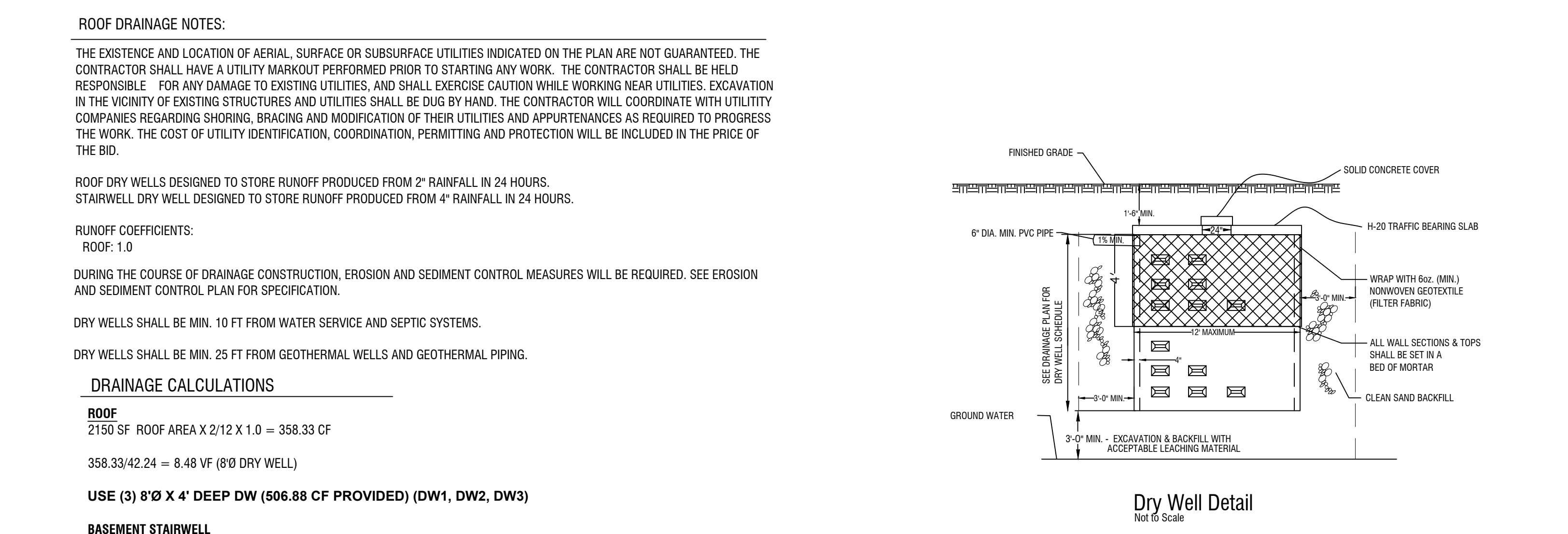
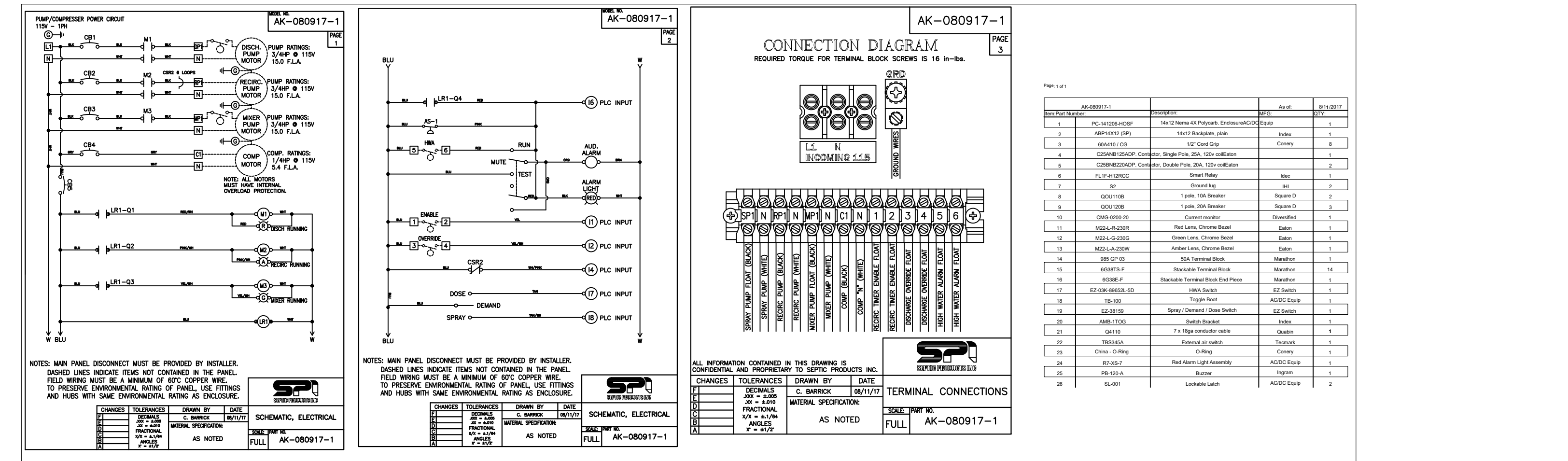
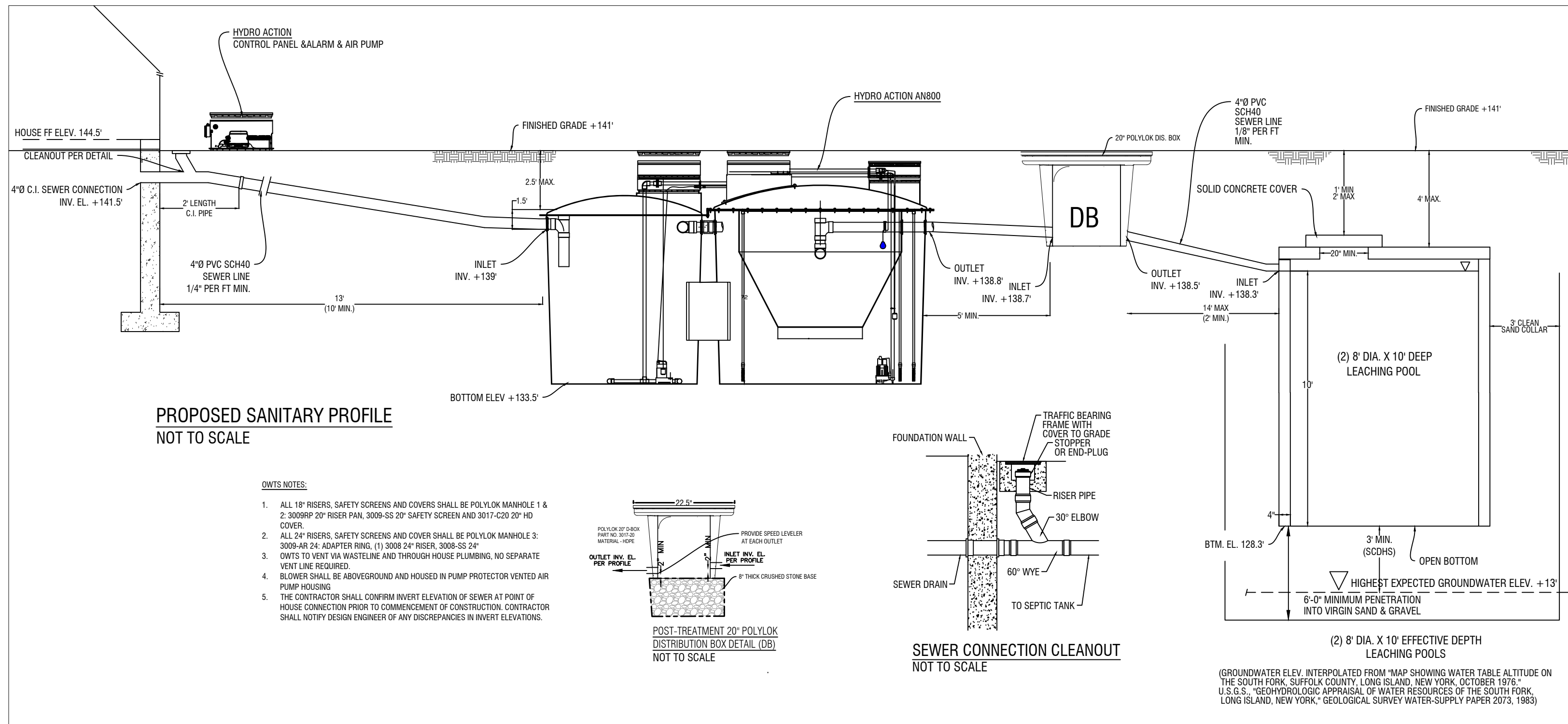
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SUFFOLK COUNTY DEPARTMENT OF HEALTH SERVICES
 PERMIT FOR APPROVAL OF CONSTRUCTION FOR A
 SINGLE FAMILY RESIDENCE ONLY

DATE 2/20/24 H.S. REF. No. R-24-0174
 APPROVED *Matthew Durina*
 FOR MAXIMUM OF 7 BEDROOMS
 EXPIRES THREE YEARS FROM DATE OF APPROVAL

Space above reserved for SCDHS approval



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