



Clermont County Public Health

2275 Bauer Road, Batavia, OH 45103
(P) 513-732-7499 (F) 513-732-7936

VARIANCE REQUEST

Fee: \$ 0.00 Variance # _____

Property Owner: _____ Phone: _____

Mailing Address: _____ City: _____ Zip: _____

Property Address: _____ Township: _____

BSA or AP# _____ For Office Use Only System Type: _____

1. APPLICABLE CODE SECTION

 OAC 3701.29.06.(C) Black Water Holding Tank Variance: If granted, this variance allows the temporary use of a partially completed Household Sewage Treatment System. The HSTS must be completed and operational no later than _____, at which time this variance expires. The property will be in violation of Ohio law if the residence is occupied and the HSTS installation is not completed and approved by this date. The Clermont County Board of Health will bring action against the property owner to compel compliance and may require that the residence be vacated until such time as compliance is achieved.

 OAC 3701.29.15.(D-H): Vertical Separation Distance Variance

 OAC 3701.28.17.13.(D)2&(J)2: Keep a Well for Agricultural Use

 OAC 3701.29.06.(G)3: Isolation Distance

 REG 415.05(D): Connect a New Home to an Existing HSTS Number of bedrooms: _____ (Current) _____ (Proposed)

 OAC/REG: _____

OAC 3701-29-9 (A)1b Required Soil Evaluation Variance

2. DETAILS OF REQUEST:

3. This variance request is contingent upon compliance with all conditions set forth by Clermont County Public Health as listed on the back of this request, as well as the following condition(s):

Signature of Property Owner/Agent

Date

PUBLIC HEALTH STAFF RECOMMENDATION

Staff Signature

Title

Date

Board of Health Representative

Date

Approved _____

Denied _____