



**MARICOPA COUNTY ENVIRONMENTAL SERVICE DEPARTMENT**  
**WATER & WASTE MANAGEMENT DIVISION**  
**ONSITE WASTEWATER SYSTEMS PROGRAM**  
 501 North 44th Street, Suite 200, Phoenix, AZ 85008  
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**NOTICE OF INTENT TO DISCHARGE (NOID)  
 ON-SITE WASTEWATER TREATMENT FACILITY CHECKLIST**

**NOID APPLICATIONS FOR TREATMENT AND DISPOSAL WORKS SYSTEM DESCRIBED IN R18-9-E303 THROUGH R18-9-E323 MUST INCLUDE ALL APPLICABLE ITEMS ON THIS CHECKLIST, IF NOT ALREADY SUPPLIED WITH THE PHASE I APPLICATION. INCOMPLETE OR INACCURATE SUBMITTALS MAY RESULT IN REVIEW OR APPROVAL DELAYS OR DENIAL OF APPLICATIONS PRIOR TO THE EXCEEDANCE OF THE LICENSING TIME FRAMES.**

Applicant	MCESD	ITEMS REQUIRED FOR ALL APPLICATION SUBMITTALS
<input type="checkbox"/>	<input type="checkbox"/>	Complete <a href="#">NOID application</a> , signed by owner <b>OR</b> owner's agent
<input type="checkbox"/>	<input type="checkbox"/>	Vicinity map and detailed driving directions to the site ( <a href="#">Sample Vicinity Map</a> )
<input type="checkbox"/>	<input type="checkbox"/>	One (1) complete site plan, with north arrow, at a scale of 1"=10', 1"=20', or 1"=30'. For large parcels, use an appropriate scale to fit entire parcel on one sheet. The proposed on-site system, the structure(s) it serves, and the immediate area may be contained within the dimensions of the parcel drawing or on a separate sheet. Site plans must include the items described in R18-9-A309.B. including project information block, parcel dimensions, test holes, structures, driveways, concrete or paved features, washes, easements, wells, earth fissures ( <a href="#">Earth Fissure Map</a> ), water lines, and any feature within 200' that constrains to location of the designated primary or reserve onsite wastewater treatment facility area ( <a href="#">Standard Setback Requirements</a> ). Topography must be delineated with an appropriate contour interval, with original and post-installation grades including any slopes greater than 15 percent.
<input type="checkbox"/>	<input type="checkbox"/>	One copy of complete floor plan(s) of the entire structure(s) served by the onsite wastewater treatment facility(s) with all rooms identified and plumbing fixtures clearly labeled. Plans should include walls, windows and doorways. ( <a href="#">Sample Floor Plans</a> )
<input type="checkbox"/>	<input type="checkbox"/>	Design documents that include: fixture unit and bedroom equivalent determination (or method of daily design flow calculation for non-residential properties), soil absorption rate (SAR) daily design flow (in gallons per day), and calculation of system size. ( <a href="#">Sample design documents</a> )
<input type="checkbox"/>	<input type="checkbox"/>	Copies of soil/site evaluations, percolation tests or seepage pit performance tests
<input type="checkbox"/>	<input type="checkbox"/>	List of estimated materials, components, and equipment for constructing the on-site wastewater treatment facility ( <a href="#">Materials, Components, and Equipment List</a> )
<input type="checkbox"/>	<input type="checkbox"/>	Applicable fees, payable by cash, check, Visa, MasterCard, Discover, or American Express at time of submittal
ITEMS REQUIRED FOR AN ALTERNATIVE/ENGINEERED ONSITE WASTEWATER TREATMENT FACILITY		
<input type="checkbox"/>	<input type="checkbox"/>	For <b>Alternative/Engineered On-Site Wastewater Treatment Facilities</b> (permitted under R18-9-E303 through R18-9-E323), the design documents must also include:
		Construction-quality drawings that indicate:
<input type="checkbox"/>	<input type="checkbox"/>	Systems, subsystems and key components, including manufacturer's name, model number and associated construction notes and inspection milestones, as applicable
<input type="checkbox"/>	<input type="checkbox"/>	Title block, including facility owner, revision date and page numbers
<input type="checkbox"/>	<input type="checkbox"/>	Plan profile with elevations of wastewater pipelines and treatment and disposal components, including calculations justifying the absorption area
<input type="checkbox"/>	<input type="checkbox"/>	Cross sections showing wastewater pipelines, construction details and elevations of treatment and disposal components, and original and finished grades of the land surface, seasonal high water table if less than 10 feet below the bottom of a disposal works or 60 feet below the bottom of a seepage pit and a soil evaluation to allow verification of installation design and performance
<input type="checkbox"/>	<input type="checkbox"/>	Drainage pattern, drainage controls and erosion protection, as applicable, for the facility
<input type="checkbox"/>	<input type="checkbox"/>	Draft operation and maintenance manual for the on-site wastewater treatment facility, consisting of the tasks and schedules for operating and maintaining performance over a 20-year life
<input type="checkbox"/>	<input type="checkbox"/>	Any additional design requirements as listed under R18-9-E303 through R18-9-E323

		<b>Requests to install a treatment works and disposals works described in R18-9-E303 through E322 where the site can accommodate a septic tank and disposal works system described in R18-9-E302:</b>
<input type="checkbox"/>	<input type="checkbox"/>	A statement signed by the applicant indicating that: The applicant is aware that although a septic tank and disposal works system described in R18-9-E302 is appropriate for the site, the applicant desires to install a treatment works or disposal works authorized under R18-9-E303 through R18-9-E322 and the applicant is aware that a treatment works or disposal works authorized under R18-9-E303 through R18-9-E322 may result in higher capital, operation, and maintenance costs than a septic tank and disposal works system described in R18-9-E302.

**ITEMS REQUIRED FOR PROPERTIES WITHIN INCORPORATED AREAS**

<input type="checkbox"/>	<input type="checkbox"/>	Sewer availability determination ( <a href="#">Sewer Availability</a> )
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**ITEMS REQUIRED FOR PROPERTIES PROPOSING SEPTIC SYSTEMS WITHIN 50' TO AN UNDEVELOPED PROPERTY**

<input type="checkbox"/>	<input type="checkbox"/>	<a href="#">Shared Well Agreement</a> with survey OR <a href="#">Affidavit of Agreement to Encroach</a> recording number
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**INTERNAL USE ONLY - ADMINISTRATIVE REVIEW**

Owner:		Permit/File Number:
Project Address or Parcel Number:		
Are all required items submitted with the application? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Administrative Review Status:		
Administrative Review Comments:		
Reviewed By:	Phone Number:	Email:

The applicant understands that this document serves as the Maricopa County Environmental Services Department's notification of the application submittal status. If the application submittal receives a status of "Hold", work on the application will be suspended by the Department until the identified application deficiencies have been resolved. Applications will expire one year after being placed on hold. Fees are nonrefundable.

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Applicant's Name Applicant's Signature Date