

Hazen and Sawyer, P.C. 10002 Princess Palm Avenue Registry One Building, Suite 200 Tampa, Florida 33619 (813) 630-4498 Fax: (813) 630-1967

Homeowner Agreement

To Participate in Florida Onsite Sewage Nitrogen Reduction Strategies Study

Nitrogen is an important concern for water quality. Animals, crops, ecosystems, and human health can be adversely impacted by the presence of nitrogen in water supplies. The environmental effects of nitrogen on groundwater and surface water can ultimately lead to the degradation of surface waters in watershed systems that have strong groundwater/surface water interactions. Nitrogen that enters surface water bodies via these interactions can lead to algal blooms and eutrophication. These processes lead to oxygen depletion in surface waters which can be harmful to natural aquatic life. In Florida, the protection of watersheds, in particular surface water bodies, has led to the legislation of protection of these areas (i.e., the Wekiva River Protection Act).

A research study to examine nitrogen reduction strategies for onsite sewage treatment and disposal systems in the State of Florida is underway. The project is being conducted by Hazen and Sawyer, P.C an environmental engineering firm under contract with the Florida Department of Health (FDOH).

One element of this research project is to prioritize nitrogen removal technologies under field conditions. To reach this goal, field-testing of nitrogen reducing technologies at home sites is needed to compare various treatment systems for their ability to remove nitrogen. Monitoring nitrogen reduction of the systems will occur at various locations in the State of Florida. In addition, the research project includes subsurface and groundwater monitoring which will be used to assess the current level of nitrogen reduction obtained by Florida soils and to assess groundwater impacts due to conventional and nitrogen removal systems.

The participation of select homeowners is essential for the success of this research program. Therefore, we are looking for volunteers to allow their onsite wastewater systems to be used for this project. All homeowners will remain anonymous in all data analysis and reporting. The study will last up to two years with all site visits scheduled at the homeowner's convenience. The work at each property may include:

- Property walkovers to characterize land uses and features
- Collection of information from the owner regarding water use and wastewater system data
- Installation of new wastewater treatment equipment
- Soil borings
- Installation of monitoring wells
- Collection of wastewater samples
- Monitor energy used and other operational costs

Hazen and Sawyer, P.C. will be responsible for: application for permits, modifications, operation, maintenance, monitoring, inspections, and removal or leaving the system in place at study termination. The project funds will cover the cost of any permits required, any new technology installed, maintenance costs, and restoration of property to original condition. All project payments will terminate upon site closure. The homeowner shall agree to not tamper with the system during the monitoring period. The site will be restored to the original condition upon completion of the study if desired by the homeowner. All homes participating in the study will receive a \$250 cash incentive.

If you are interested in becoming involved in this important research project, please fill in the information below and sign where indicated. We will coordinate all our activities with you and give you any additional information you require prior to beginning work at your property.

Thank you for taking the time to consider this request, and we look forward to your response.

Very truly yours,

Hazen and Sawyer, P.C.

Name:	
Address:	
Mailing Address:	
Telephone:	
Fax:	
Email:	
	stalled/existing to be evaluated: UD SITE LIGHTED SUCTEM

HOMEOWNER

By:

encl.: Residential Evaluation Survey

HAZEN AND SAWYER, P.C. 10002 Princess Palm Avenue Registry One, Suite 200 Tampa, FL 33619

By: Damann L. Anderson

Title: Vice President

Lawram S. Andhison

Edeback, Josefin

From:

Sent: Friday, February 25, 2011 7:57 PM

To: Edeback, Josefin

Subject: RE: Homeowner Agreement for participating in the on-site sewage nitrogen reduction study

Hi Josefin,

I took the on-line survey butam not sure if it was sent, received a termination statement. I have attached the form below for your use.

When you are ready please let me know how or if we should proceed from here, thanks!

Residential Evaluation Survey

(In case you are having trouble with submitting the info, please contact Josefin: 813-630-4498)

Name: Address Street Address: Required Ocala City: State: FL 34479 Zipcode: Mailing Address (If different from Same above): Daytime Phone(Work or Cell): Evening Phone(Work or Cell): Email: Email required Parcel#: Unknown at this time Designer: Sub for Owens Installer: Construction City(of Installer): Ocala State:(of Installer) FL Property Size(acres or sq.ft) 3.59 Acres

A. Home/Residents

Is this your first home with an on-site wastewater treatment system? (X)Yes ()No

Did you receive any septic system user information? ()Yes (X)No

Did you receive the as-built drawing for the system? ()Yes (X)No

Any additions to home since septic system was built? Bedrooms : $[0 \lor]$

 $\begin{array}{ll} \text{Bathrooms}: [0 \ \lor] \\ \text{Other}: & [1 \ \lor] \end{array}$

Type of Use: [Permanent \bigvee]

If Seasonal, number of months used $[0 \lor]$

Number of people living in the home

Age Group(Years)	Male	Female	
Adults(18-65)	[1 \/]	[1 \/]	
Adults(>65)	[0 \/]	[0 \/]	
Children(<13)	[2 √]	[0 \/]	
Teenagers(13-17)	[0 \/]	[0 \/]	

Guests(Average per month): $[2 \lor]$

Number of bedrooms: $[3 \lor]$

Number of bathrooms: $[2 \lor]$

Number of Pets: $[1 \lor]$

Number of Pet Baths per month: $[0 \lor]$

Number of showers per week: $[11-20 \ \lor]$

Number of baths per week: $[8 \lor]$

Water Supply: [Private

	Well	l \/]		
Water Supply Other Name:	[]		
Do you have a in-home business?	()Y	es (X)No		
If yes what type?	[]		
Do you use septic system additives	? ()Y	es (X)No		
If yes, what products?	[]		
Frequency	[]		
Type of pretreatment system:			[Septic Tank ∨]	
Specific type of system			[]	
Make and Model			[]	
How old is the system? (years)			7	
Date of last pump out			Has not been pumped to date.	
Has the system ever backed up?			()Yes (X)No	
Has the baffels ever been plugged?			()Yes ()No	
Is there an effluent screen in septic	tank o	outlet?	()Yes ()No	
Has effluent screen ever plugged?			()Yes ()No If yes, please mention date(s): []
Has the system ever been repaired?			()Yes (X)No If yes, please mention date(s): []
Has effluent ever surfaced?			()Yes (X)No	
Has the alarm ever sounded?			()Yes (X)No	
Soil type - at drain field depth or lo	wer:		Arredondo - Type "A" per NRCS Map	
Type of distribution/dispersal syste	m:		[Gravity √]	

If Other, type of distribution/dispersal system:	[]
Is water softner used?:	()Yes (X)No
Reverse osmosis?:	()Yes (X)No
Backwashing water filter(iron,sediment,etc)?:	()Yes (X)No
Other water treatment devices:	[]
Is there an outside power supply?:	(X)Yes ()No
If yes, does the power supply have its own breaker	^{c?} ()Yes()No
How many amps?	[]
If there an outside water spigot?	(X)Yes ()No
[Save Information]	
ring or binary data would be truncated. The statement	ent has been terminated.
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STATE OF FLORIDA DEPARTMENT OF HEALTH

ONSITE SEWAGE TREATMENT AND DISPOSAL SYSTEM

CONSTRUCTION PERMIT

Temp #: SL 1564-03

FEE PAID : \$ 200.00 RECEIPT : 117972

OSTDS NBR :

CENTRAX #:

MCB&Z # : 20031*OOS*&

DATE PAID : 10/10/2003

CONSTRUCTION PERMIT FOR:

[X] New System []Existing System [] Holding Tank | Innovative Other]Repair [] Abandonment []Temporary [

APPLICANT: Owen Construction AGENT: David Owen Construction

PROPERTY STREET ADDRESS

BLOCK: SUBDIVISION:

[Section/Township/Range/Parcel No.]

PROPERTY ID [OR TAX ID NUMBER]

SYSTEM MUST BE CONSTRUCTED IN ACCORDANCE WITH SPECIFICATIONS AND STANDARDS OF CHAPTER 64E-6, FAC DEPARTMENT APPROVAL OF SYSTEM DOES NOT GUARANTEE SATISFACTORY PERFORMANCE FOR ANY SPECIFIC TIME PERIOD. ANY CHANGE IN MATERIAL FACTS WHICH SERVED AS A BASIS FOR ISSUANCE OF THIS PERMIT, REQUIRE THE APPLICANT TO MODIFY THE PERMIT APPLICATION. SUCH MODIFICATIONS MAY RESULT IN THIS PERMIT BEING MADE NULL AND VOID. ISSUANCE OF THIS PERMIT DOES NOT EXEMPT THE APPLICANT FROM COMPLIANCE WITH OTHER FEDERAL, STATE OR LOCAL PERMITTING REQUIRED FOR PROPERTY DEVELOPMENT.

CVCTEM	DECTON	7/ 1/17	SPECIFICATION	C

				APPROVED OUTLET FILTER DEVICE : [Y]
Τ	[900] Gallons SEPTIC TANK	MULTI-CHAMBERED/IN SERIES: [Y]
Α	[0] Gallons	MULTI-CHAMBERED/IN SERIES: []
N	Γ	0	GALLONS GREASE INTERCEPTOR CAPACITY	

Κſ 0]GALLONS DOSING TANK CAPACITY [0]GALLONS @ [0]DOSES PER 24 HRS # PUMPS[0]

333 | SQUARE FEET PRIMARY DRAINFIELD SYSTEM O] SQUARE FEET SYSTEM [**N**] MOUND [**N**]_ TYPE SYSTEM: [Y]STANDARD [N]FILLED Α CONFIGURATION: [Y]TRENCH [**N**] BED [N]____ Т N

LOCATION TO BENCHMARK: Red Tape Nailed To Fence Post ELEVATION OF PROPOSED SYSTEM SITE [24] [INCHES] [BELOW] BENCHMARK/REFERENCE POINT BOTTOM OF DRAINFIELD TO BE [54] [INCHES] [BELOW] BENCHMARK/REFERENCE POINT

Τ. D FILL REQUIRED: [0] INCHES EXCAVATION REQUIRED: [0] INCHES

OTHER REMARKS and PERMIT REQUIREMENTS:

This New Construction Permit EXPIRES 18 months from date of issue. ** See NOTICE OF RIGHTS ** Maintain 75 feet from all private potable wells. The licensed contractor installing the system is responsible for installing the minimum category of tank in accordance with s.64E-6.013(3)(f), FAC.

SITE EVALUATION BY: Payne, David Env Supervisor II TITLE: SI/ Marion CHD APPROVED BY: (EXPIRATION DATE: 4



STATE OF FLORIDA DEPARTMENT OF HEALTH ONSITE SEWAGE DISPOSAL SYSTEM APPLICATION FOR CONSTRUCTION PERMIT

DATE PAID:	
FEE PAID:	
RECEIPT #:	

ONSITE SEV	FLORIDA T OF HEALTH NAGE DISPOSAL SYS ON FOR CONSTRUCTI		PERMIT N DATE PAI FEE PAID RECEIPT	D:
APPLICATION FOR: [] New System [] [] Repair []	Existing System Abandonment	[] Hold [] Temp	ing Tank [] orary []	Innovative (
APPLICANT: OWEN				
AGENT: Chien	STRUCT.		TELEPHONE:	
MAILING ADDRESS:				-
				========
TO BE COMPLETED BY APPLICADE BY A PERSON LICENSED PURSU				
PROPERTY INFORMATION				***********
LOT: BLOCK:	SUBDIVISION:		PL	ATTED:
PROPERTY ID #:/		S)	- /v an	
PROPERY SIZE: 3.39 ACRES	WATER SUPPLY:	PRIVATE PU	BLIC []<=2000GP	D []>2000GPD
IS SEWER AVAILABLE AS PER	381.0065, FS? [187	DISTANCE TO S	EWER:FT
PROPERTY ADDRESS:				
DIRECTIONS TO PROPERTY:				
_57				
BUILDING INFORMATION	[] RESIDEN	TIAL []	COMERCIAL	
Unit Type of No Establishment			ial/Institutional , Chapter 64E-6,	
1 500	- <u> </u>	1491		
2				
3				TO A DIE
		HEE. I	JON DEELL	MIABLE
A			NON REFU	ADABLE
4			NON REFU	WDABLE
[] Floor/Equipment Drain	ns other		NON REFU	WDABLE



STATE OF FLORIDA DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number _ PART II - SITE PLAN-100 Scale: Each block represents 5 feet and 1 inch = 50 feet. O 250 Notes: Site Plan submitted by: Signature Plan Approved Date Not Approved _ **County Health Department**

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT



2003 STATE OF FLORIDA DEPARTMENT OF HEALTH ONSITE SEWAGE TREATMENT AND DISPOSAL SYSTEM CONSTRUCTION INSPECTION AND FINAL APPROVAL SL 1564-03

OSTDS NBR: CENTRAX #: DATE PAID: 10/10/2003

FEE PAID: \$ 200.00 RECEIPT :

	-	Owen Construction			GENT: David Owen Construction
ROPERT	Y ST	REET ADDRESS:	0	cala	
OT:	··········	BLOCK:	SUBDIVISION:	ation /	Tormship / Dongs / Dongs No. 1
ROPERTY	Y ID	#:_	[OF	R TAX I	Township/Range/Parcel No.] D NUMBER]
HECKED	[X]	ITEMS ARE NOT IN	COMPLIANCE WITH	СНАРТЕ	CR 64E-6, FLORIDA ADMINISTRATIVE CODE.
	[01] [02] [03] [03] [04] [05] [06]	C INSTALLATION TANK SIZE [1] 90 TANK MATERIAL OUTLET DEVICE: TYPE 2934 MULTI-CHAMBERED LEGEND 42-0 WATERTIGHT LEVEL DEPTH OF LID INFIELD INSTALLATION AREA [1] 3.6 DISTRIBUTION BOX NUMBER OF DRAINLE DRAINLINE SEPARAS	DN [2]		SETBACKS [27] SURFACE WATER [28] DITCHES [29] PRIVATE WELLS [30] PUBLIC WELLS [31] IRRIGATION WELLS [32] POTABLE WATER LINES [33] BUILDING FOUNDATION [34] PROPERTY LINES 45 [35] OTHER FILLED/MOUND SYSTEM [36] DRAINFIELD COVER [SOD / HAY] [37] SHOULDERS [38] SLOPES [39] STABILIZED:
	[14] [15] [16] [17] [18] [19] [20] [21]	DEPTH OF COVER SYSTEM ELEVATION SYSTEM LOCATION DOSING PUMPS © AGGREGATE SIZE AGGREGATE SOURCE AGGREGATE WASHED AGGREGATE DEPTH	" 24 4x/ory	sk [ADDITIONAL INFORMATION [40] UNOBSTRUCTED AREA [41] STORMWATER RUNOFF [42] ALARMS [43] MAINTENANCE AGREEMENT [44] BUILDING AREA [45] PLUMBING FIXTURES [46] FINAL SITE GRADING [47] CONTRACTOR
[] [] []	[22] [23] [24] [25]	L/EXCAVATION MATER: FILL AMOUNT FILL TEXTURE EXCAVATION DEPTH EXCAVATION AREA REPLACEMENT MATE		ſ	ABANDONMENT [49] TANK PUMPED // [50] TANK CRUSHED AND FILLED //
XPLANA	TION	OF VIOLATIONS:			

FINAL SYSTEM (Approved / Disapproved] LW

DH 4016, 03/97 (Obsoletes revious editions which may not be used) (Stock Number: 5744-002-4016-4) [ostds_cins_4016-2]

CONSTRUCTION [Approved > Disapproved]

Page 2 of 2

CHD Date: 2

Marion CHD Date: 2/1

Marion



DH 4015, 10/96 (Replaces HRS-H Form 4015 [Page 3] which may be used) (Stock Number: 5744-003-4015-1)

STATE OF FLORIDA DEPARTMENT OF HEALTH ONSITE SEWAGE DISPOSAL SYSTEM SITE EVALUATION AND SYSTEM SPECIFICS

PERMIT #



SITE EVALUATION AND SYS	TEM SPECIFICATIONS
APPLICANT: OWN CONST	AGENT:
LOT: BLOCK. SUBDIV	VISION:
PROPERTY ID	[Section/Township/Range/Parcel No. or Tax ID Number]
TO BE COMPLETED BY ENGINEER, HEALTH UNIT PROVIDE REGISTRATION NUMBER AND SIGN AND	D SEAL EACH PAGE OF SUBMITTAL. COMPLETE ALL ITEMS.
PROPERTY SIZE CONFORMS TO SITE PLAN: TOTAL ESTIMATED SEWAGE FLOW: AUTHORIZED SEWAGE FLOW: UNOBSTRUCTED AREA AVAILABLE: 2000	YES [] NO NET USABLE AREA AVAILABLE: 3.59 ACRES GALLONS PER DAY RESIDENCES-TABLE 1 / OTHER-TABLE 21
ELEVATION OF PROPOSED SYSTEM SITE IS	
WELLS: PUBLIC: FT LIMITED USE:	HES/SWALES: FT NORMALLY WET? [] YES () NO PRIVATE: FT NON-POTABLE: FT POTABLE WATER LINES: FT FT
SITE SUBJECT TO FREQUENT FLOODING: [] 10 YEAR FLOOD ELEVATION FOR SITE:	YES K NO 10 YEAR FLOODING? [] YES () NO OF THE STANDARD OF
SOIL PROFILE INFORMATION SITE 1	SOIL PROFILE INFORMATION SITE 2
Munsell #/Color Texture Depth 104/12 J/3 Dk BIN FS Q to 104/12 J/4 Dk 4/911 BIN FS & to 2 104/12 5/8711 BIN FS 28 to 154/12 6/8 BIN 7111 FS 74 to 6 104/12 6/8 BIN 7111 LS 60 to to to	10712 5/6 4411 1312 15.
USDA SOIL SERIES: Arb like	USDA SOIL SERIES: Arredond o like
ESTIMATED WET SEASON WATER TABLE ELEVATION HIGH WATER TABLE VEGETATION: [] YES CONTINUED TO SOIL TEXTURE/LOADING RATE FOR SYSTEM SIZE DRAINFIELD CONFIGURATION: [] TRENCH	NO MOTTLING: [] YES [A NO DEPTH: MY INCHES ZING: Fire Sand of DEPTH OF EXCAVATION: MY INCHES
REMARKS/ADDITIONAL CRITERIA:	
SITE EVALUATED BY:	DAVID PAYNE DATE: 10/13/03
DH 4015 10/05 (Parlages HPS H Form 4045 (Page 2) which are	Page 3 of 3

