

GUIDELINES

DIVISION OF SANITATION FACILITIES CONSTRUCTION

Office of Environmental Health and Engineering
Navajo Area Indian Health Service
Window Rock, Arizona

CHAPTER 8--Homeowner Coordination

Section 1: Project Participant Folders and Requests for Individual Facilities

Guideline No. 8.1 (99-13)

October 1, 1999

Supersedes: G 8.1 (96-1), G 8.1 (88-13), G 80-5

Distribution: Standard List

INTRODUCTION

An individual folder will be established and maintained for each participant on a Public Law 86-121 project and requests for service should be documented. Additionally, a homeowner file containing individual folders for each participant is to be maintained during and after project completion.

The individual folder should include several standard forms (see attachments) each of which should be utilized as follows:

Request for Individual Sanitation Facilities - Attachment A should be completed on the first visit to a home to get all required family and design data. This form should also be used for "walk in" requests for service. The bottom half of the third page should be used to draw a map for locating the home. The fourth page should be used to plan the facilities needed and their location. The sketch is needed so that there is no doubt of the drainfield location when the NECA crew arrives. The form is also crucial for plumbing wall installations.

Districts may modify or substitute forms for Attachment A to meet local conditions if such changes fulfill the intent of Attachment A to gather appropriate information.

Individual Agreement - This form, Attachment B, includes a statement by the homeowner agreeing to pay a water user's bill, a place for the homeowner to sign both before and after the facilities are installed, and a statement about a 12-month warranty on the materials and installation. The facilities to be provided should be listed on this form.

Record of Visits - Attachment C is to be used to document visits relating to problems, motivation, etc.

Individual As-Built - Copies of Attachment D shall be provided to the operating utility and the homeowner.

Homeowner Training Record - Attachment E should be used for documenting homeowner training and for measuring training accomplished by staff. In lieu of this attachment, a training certificate can be issued to the homeowner and a copy placed in the homeowner's file.

Soil Evaluation Form - Completion of the form in Attachment F is required for each drainfield design.

APPROVED BY:



C. Lewis Fox, Jr., P.E., Director
Division of Sanitation Facilities Construction

Attachment A - Request for Individual Sanitation Facilities
Attachment B - Individual Agreement
Attachment C - Record of Visits
Attachment D - Individual As-built
Attachment E - Homeowner Training Record
Attachment F - Soil Evaluation Form

REQUEST FOR INDIVIDUAL SANITATION FACILITIES

Navajo Area Indian Health Service
Office of Environmental Health and Engineering
Division of Sanitation Facilities Construction

_____ First Name: _____ Census # _____
Last Name
Spouse Name: _____ Census # _____

Mailing Address: _____ Chapter: _____
City, State, Zip: _____ Phone : _____

Home

Housing: Please Circle Appropriate Answer

Work

Type: (house) (trailer) (hogan) (other: _____) Electricity: (yes) (no)

Number of Bedrooms: _____ Heating: (gas) (electric) (wood) (coal) (other: _____)

Number of People Living in Home: _____ Condition: (excellent) (good) (poor)

House Color: _____ Where do you now get water? _____

Where do you now haul your garbage? _____

Approximately how far is the home from the nearest waterline? _____

Approximately how far is the home from the nearest sewerline? _____

Homesite Lease: Check only one box

- Have an approved and completed Homesite Lease. (Provide Copy)
- My application for a Homesite Lease has been approved by the Bureau of Indian Affairs in Window Rock. (Provide Copy of Approval)
- I am currently applying for a Homesite Lease. (Be sure to provide IHS with a copy of Bureau of Indian Affairs approval as soon as you receive it)
- I have no plans for a Homesite Lease.

Bathroom: Check only one box

- Have completely plumbed bathroom now.
- Will install bathroom/plumbing myself. Will be finished _____
(Be sure to notify IHS when it is complete) Date
- Will receive assistance from _____ for bathroom.
Agency/Organization
- Have no bathroom and have no plans to build one.

Please Circle Appropriate Answer

1. Is the home to be served your permanent home? (yes) (no)
2. Have you or your spouse ever received water or sewer facilities from the IHS?
(yes) (no)
3. Are you willing to make payment to the utility authority for water and/or sewer?
(yes) (no)
4. Will you accept ownership of the facilities installed, which may include a water service line, sewer service line, septic tank/drainfield system or cistern system?
(yes) (no)
5. In order to function properly, a septic tank must be pumped periodically to remove solids. This usually costs from \$50 to \$100 and will be your responsibility. Are you willing to have your septic tank pumped every 3 to 5 years? (yes) (no)
6. When you have a water supply in your house, you will need to know how to keep the plumbing in good repair and ways to keep your water safe. Will you attend homeowner training for this purpose? (yes) (no)

Comments: (ant additional information about your application)

Signature

Date

FOR IHS USE ONLY. DO NOT WRITE IN BOX

Code: _____	Priority date: _____	IHS Project: _____
Received by: _____	Date Received: _____	
Initial Visit will be by: _____	on Date: _____	

_____ First Name: _____

Last Name

Spouse Name: _____

Chapter Name: _____

Nearby Neighbors Names: _____

Home Location

Draw sketch of home location and best way to get there.

Include roads, neighbors, etc. wherever possible.

Be sure to label everything that is drawn.

PROPOSED FACILITIES LAYOUT

____ First Name: _____ IHS Project No. _____
Last Name

Sketch (Indicate proposed location of septic tank & drainfield or sewer service line, water service line and plumbing layout within house)

Plumbing Option:	To be Provided by Homeowner
___ Left hand short wall	___ Gas Water Heater ___ gal. Propane ___ LP ___
___ Right hand short wall	___ Electric Water Heater ___ gal.
___ Left hand long wall	___ Left hand bathtub w/faucets
___ Right hand long wall	___ Right hand bathtub w/faucets
___ Partition within existing house	___ Shower
___ New Addition	___ Other, specify _____
___ Already have Plumbing	_____

Required Drainfield Length _____ ft.

Required Septic Tank Size _____ gal.

Remarks: _____

Date: _____ IHS Representative: _____

U.S. Department of Health and Human Services
Public Health Service
Indian Health Service

PROJECT NO. _____

INDIVIDUAL AGREEMENT
Between Head of Household and U.S. Public Health Service
under Public Law 86-121

The IHS will provide a 12 month warranty period for the facilities checked below commencing from the date of installation and acceptance by me, unless negligence, lack of preventive maintenance, or damage due to acts of nature are the cause of failure.

I hereby agree to accept upon completion of installation the following described facilities to be installed on the premise located herein and on land occupied by me. I also agree to operate, maintain and keep these facilities in good repair at my expense. I further agree to pay utility bills resulting from my use of these facilities.

- Water Service Line w/appurtenances
- Cistern w/electric pump and pressure tank
- Cistern, gravity feed
- Septic Tank and Drainfield
- Alternative Disposal System
- Short Plumbing Wall
- Long Plumbing Wall
- Rough-in Plumbing
- Lavatory
- Toilet
- Kitchen Sink
- Other (specify): _____

Premise Location: _____

(Date)

(Signature of Head of Household)

I hereby accept the above facilities with warranty beginning _____.

(Date)

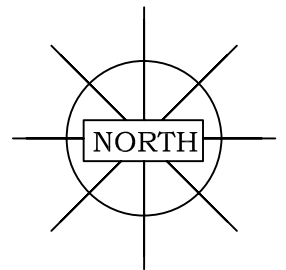
(Signature of Head of Household)

I hereby certify that the above described facilities have been installed.

(Date)

(Signature of Project Engineer)

HOUSE NO. _____
 NAME _____
 PROJECT NO. _____
 CHAPTER _____
 ACAD FILE NAME: _____



NOTE: NOT TO SCALE

INDIVIDUAL DRAWING

ITEM DESCRIPTION	SYMBOL	MATERIALS		HOUSE CORNER TIES (FT.)					DRAWN BY: _____
		SIZE	MAT'L	NW	NE	SW	SE		
CURB STOP	⊙	1"	/						APPROVED BY: _____
WATER METER	Ⓜ	3/4"X5/8"							DATE: _____
WATER METER W/IND. PRV	Ⓜ*	3/4"X5/8"							
DOMESTIC STOP	○	1"	/						
YARD HYDRANT	⊕	1"	/						
MARKER POST	⊥	T-POST STEEL							AS-BUILT: <input type="checkbox"/>
SEPTIC TANK	⊠	1000 GAL. CONCRETE							REMARKS: _____
CISTERN TANK	⊙	1000 GAL. PE							
CLEAN OUT #1	●		/						
CLEAN OUT #2	●		/						_____
HOUSE SERVICE LINE	—	1"	P.E.	DRAINFIELD INFORMATION LINES _____ AREA _____ SQ. FT. WIDTH _____ FT. LENGTH _____ FT. SOIL TYPE: _____					_____
MAIN WATER LINE	—W—		PVC						_____
SEWERLINE	—S—	4"	PVC						_____
INFILTRATOR	▢	6' x 3'	P.E.						_____
DWELLING, OTHER BLDGS	▨		/						_____

HOMEOWNER TRAINING RECORD

HOMEOWNER'S NAME

PROJECT NO.

I certify that on this date that the above homeowner has been provided with operation and maintenance training in the use of his individual sanitation facilities and that he/she was provided with a copy of the "Homeowner Manual".

NAME

TITLE

DATE

DRAINFIELD DESIGN INFORMATION WORKSHEET

Homeowner _____

House # _____ Community
Project # NA- _____ - _____

Is there evidence of hardpan or bedrock? How deep? Describe: _____

Is there evidence of a high water table? How deep? Describe: _____

Is there evidence of flooding? Describe: _____

Is there enough land area available? _____

What is the slope of the lot? _____ <8%, _____ >8% but <15%, _____ >15%

Are there any other features that hinder construction, such as washes, poor drainage, boulders, trees, etc. Note any such features on the proposed layout sheet.

What is the USDA soil texture using the triangle? _____

What is the sewage application rate? _____ gpd/ft²

How many people live in the home? (Remember to think ahead for the design life of the drainfield.) _____

From the "Required Area for Drainfield" chart, what is the required drainfield area? _____

What will be the trench width? (Gravel and pipe systems are usually 2-feet wide, the infiltrator uses a 3-foot wide trench.) _____

What is the required drainfield length? (required area ÷ trench width) _____

Notes: _____

