



**Connecticut River Area Health District**  
166 Main Street Unit #2, Old Saybrook, Connecticut 06475  
Telephone (860) 661-3300 · FAX (860) 661-3333

\_\_\_\_\_  
\_\_\_\_\_  
Old Saybrook, CT 06475

Certified Mail, Return Receipt Requested

Property ID # \_\_\_\_\_

Re: Notice of Entry into Old Saybrook Wastewater Management District Program:  
Phased Implementation

Dear Property Owner:

In accordance with §173-25.A.(3) and §173-25.B. of the Code of the Town of Old Saybrook (also known as the Decentralized Wastewater Management District Ordinance, the “Ordinance”), we are providing you with this Notice of Entry into Old Saybrook’s Wastewater Management program. Either you or your designee/agent must file with the Director of Health within thirty (30) days of receipt of this notice, a complete and signed application, a copy of which is attached as Exhibit A. You may deliver the application in person, return it to this office by certified mail return receipt requested, or by overnight delivery with proof of delivery required.

In order to assist you in completing the application, we are providing you with a summary of information obtained from public files about your property and the existing septic system (see Exhibit B). Please review this information carefully. Provide to this office a completed application with Exhibit B showing any corrections to such information.

After you file the application, a date will be set for conducting an Initial Investigation on your property (see §173.25.A.3 and §173.25.C. of the Ordinance). We anticipate scheduling the Initial Investigation for your area between \_\_\_\_\_ and \_\_\_\_\_. This Initial Investigation along with file information will provide data needed to determine whether or not the existing septic system requires upgrading to comply with the Ordinance’s Upgrade Program Standards. The Initial Investigation may require one or more test pit(s) to be dug on your property, and may require probing in the area of the existing system to determine or confirm the size and type of leaching structures. After the Initial Investigation, the Director of Health will either issue you an order to upgrade your septic system, along with a preliminary design criteria plan for the required upgrade, or issue you a permit to discharge if the septic system complies with the Ordinance. The Initial Investigation may also reveal that advanced treatment of wastewater is required for your property, at which point the WPCA will work with you to determine the next steps and extent of the upgrade required.

Also attached for your information is a summary of the Ordinance. A full copy of the Ordinance is available upon request from our office or the Water Pollution Control Authority (“WPCA”) office, located in Town Hall, as well as on the WPCA website [www.oswpca.org](http://www.oswpca.org). More information about the program can be found on the website.

The upgrades, if necessary, are eligible for Clean Water Fund (“CWF”) funding: Fifty percent (50%) as a low interest loan (2% over 20 years), twenty five percent (25%) as a grant, and twenty five percent (25%) as a contribution from the Town for services in kind. The Town will levy a benefit assessment on your property and make arrangements for you to pay back the loan. **If you do not want to receive CWF funding, you must decide at the time of filing your application, and complete the section included in the application form.** Failure to complete the funding waiver section on the application means you will enter into the CWF funding program. While you do not have to accept CWF funding for your site improvements, you will still be required to upgrade your property to meet the Ordinance requirements. If you waive CWF funding, the Director of Health will issue an Order to you to implement the necessary upgrades, and you will be responsible for paying a licensed septic system installer to do so in the timeframe required by the Order. The procedure you must follow is outlined in Exhibit D.

In summary:

1. Complete and sign the application form found on Exhibit A.
2. If you want to accept Clean Water Funds, check Box A on the application form.
3. If you decline Clean Water Funds, check Box B on the application form.
4. Review information in Exhibit B. Make corrections as appropriate.
5. Bring or have delivered the signed and completed application to the Director of Health within thirty (30) days of receiving this letter.

Should you have any questions about the program, or the requirements outlined in this letter, please contact our office. We look forward to your continued cooperation in making improvements to Old Saybrook’s environment.

Very truly yours,

Mary Jane Engle, MPH, R.S.  
Director of Health  
For the Town of Old Saybrook

Cc: Old Saybrook WPCA

Revised as of April 2, 2010

**EXHIBIT A**

**Connecticut River Area Health District**  
166 Main Street, Unit 2 Old Saybrook, CT 06475  
Phone 860-661-3300 Fax 860-661-3333  
*Serving Old Saybrook, Clinton and Deep River*

**APPLICATION FOR INITIAL INVESTIGATION  
AND UPGRADE OF SEPTIC SYSTEM UNDER § 173-18 ET SEQ.  
CODE OF THE TOWN OF OLD SAYBROOK AND  
TITLE 19 OF THE PUBLIC HEALTH CODE**

Date: \_\_\_\_\_  
Owners Name: \_\_\_\_\_ Day Time Phone: \_\_\_\_\_  
Property Address: \_\_\_\_\_

Mailing Address (if different from above) \_\_\_\_\_  
Email Address (optional): \_\_\_\_\_  
Number of Bedrooms in the structure on your property: \_\_\_\_\_

You must submit the completed application, including any revisions to the information about your property, within thirty (30) days of receipt of this application form

**YOU MUST CHECK ONE OF THE FOLLOWING BOXES REGARDING CLEAN WATER FUND PARTICIPATION. CHECKING BOX A MEANS YOU WILL ACCEPT CLEAN WATER FUNDS. CHECKING BOX B MEANS YOU WAIVE CLEAN WATER FUNDS .**

Box A.  I **accept** Clean Water Funds to investigate and implement upgrades as necessary on my property, and acknowledge and agree such implementation will involve access to my property for an initial investigation and may require construction by the Town to meet Town Ordinance requirements. I understand an assessment will be made against my property in accordance with § 7-249 et. seq. of the Connecticut General Statutes.

Box B.  I **decline** Clean Water Funds to implement and pay for upgrades to my septic/sewerage system under Town Ordinances. I will undertake to pay for and implement all required upgrades. The Director of Health or the Water Pollution Control Authority will issue an order with a schedule to implement the upgrades, as applicable.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

# EXHIBIT B

## • PROPERTY INFORMATION SUMMARY

### Data on File Print Form

ST NUM	STREET	
<input type="text" value="37"/>	<input type="text" value="Windy Bluff"/>	
Map Block Lot		Neighborhood
<input type="text" value="020/166"/>		<input type="text" value="Saybrook Acres"/>
OWNER		
<input type="text" value="Jonathan L. Seagull"/>		
Number of Bedrooms	Water Supply	
<input type="text" value="3"/>	<input type="text" value="Public"/>	
Perc Rate	GW Depth	Depth of Ledge
<input type="text"/>	<input type="text"/>	<input type="text" value="N/A"/>
Septic Tank Material		
<input type="text" value="Concrete"/>		
Septic Tank Size		
<input type="text" value="750 Gallons"/>		
Leaching Type		
<input type="text" value="Drywell"/>		
Leaching Trench Length	Leaching Trench Width	
<input type="text"/>	<input type="text"/>	
Effective Leaching Area from Trenches		
<input type="text"/>		
Leaching Gallery Length	Leaching Gallery Width	Leaching Gallery Height
<input type="text"/>	<input type="text"/>	<input type="text"/>
Effective Leaching Area from Galleries		
<input type="text"/>		
Number of Drywells		
<input type="text" value="1"/>		
Drywell Depth	Drywell Width	
<input type="text"/>	<input type="text"/>	
Effective Leaching Area from Drywells		
<input type="text"/>		
Sketch Available?		
<input type="text"/>		
COMMENT		
<input type="text"/>		

## **EXHIBIT C**

### **Summary of Old Saybrook Wastewater Management District Ordinance**

In accordance with Section 7-247 of the Connecticut General Statutes, following approval of a Facilities Plan/Engineering Report by the Commissioner of Environmental Protection, that includes concurrence with such approval by the Commissioner of Public Health and in consultation with (and approval of) the local Director of Health, Old Saybrook, acting in conjunction with its Water Pollution Control Authority (WPCA) has, by Ordinance (which includes Upgrade Program Standards), proposed to establish geographical areas for a Decentralized Wastewater Management District (the “WWMD”) within the Town of Old Saybrook. The Ordinance also includes elements authorized and/or required by Section 7-247(b)(1) and Section 7-247(b)(2) of the General Statutes. The Ordinance provides that certain lots, called Water Proximity Lots, to be upgraded so that nitrogen may be treated with an Advanced Treatment System (“AT Systems”). All other lots within the WWMD will be investigated, and where deemed necessary under the Ordinance, AT Systems will also be installed. Remaining lots in the WWMD will, if necessary, require upgrades to meet the Public Health Code and the Upgrade Program Standards of the Ordinance. Upgrades under the Ordinance will be phased-in during the planned implementation period, but lots on which a change in use or construction occurs, or if a lot has a malfunctioning or failed system, will be addressed at the time of such event. Orders to upgrade will be issued under the Ordinance, and after the upgrade is completed, permits will be issued for five (5) years, and application for renewal of such permit must be made every five years. The property owner will be responsible for the effective operation and maintenance of their wastewater treatment systems. The Director of Health and the WPCA will oversee and ensure that the systems are operating properly and in accordance with the Ordinance. The Ordinance may be enforced by the Director of Health or the WPCA, as appropriate, and appeals from determinations made under the Ordinance are available.

The full text of the Ordinance is on file and available for inspection at the WPCA and Town Clerk’s Office at Town Hall, 302 Main Street, Old Saybrook, CT, and at the Director of Health, Connecticut River Area Health District, 166 Main Street, Unit 2, Old Saybrook, Connecticut.

The Facilities Plan/Engineering Report, which has been approved by the Commissioner of Environmental Protection and the Commissioner of Public Health has concurred with such approval, is a comprehensive summary of the major alternatives for managing wastewater in Old Saybrook and it describes the steps needed to implement the WPCA’s recommended Decentralized Wastewater Management Program. The Facilities Plan/Engineering Report estimates that the project will serve approximately 1,900 residential units.

A copy of the Facilities Plan/Engineering Report is available for inspection at the WPCA and Town Clerk’s Office at Town Hall, 302 Main Street, Old Saybrook, CT.

## **EXHIBIT D**

### **Septic System Repair Process - Property Owner Financed (Waiver of CWF Funds)**

In the event that the property owner elects not to accept Clean Water Fund funding, the property owner will contract directly with an installer to make the required repairs/improvements. The owner forfeits the opportunity to receive technical and funding assistance from the Town and the DEP by selecting this approach. This procedure includes the following steps:

- a. Order to Repair - The Director of Health issues an order to property owner to upgrade the sewerage system
- b. Site Investigation - A site investigation is conducted by an installer who coordinates this task with the property owner and Director of Health. The backhoe and operator are provided by the installer at the owner's expense. Director of Health witnesses the soil testing and logs site testing data
- c. Design of Repair/Upgrade - The owner's installer or engineer uses the site investigation results and designs the repair/improvement needed to bring the system into compliance with the WWMD Ordinance and Upgrade Program Standards.
- d. Review of Repair/Upgrade - The designer submits the proposed design to Director of Health for review and approval. Director of Health reviews and, if appropriate, approves the repair/improvement design and (after applicable fee payments are made) issues a Permit to Construct the repair/improvement.
- e. Installation - The installer makes the repair/improvement in conformance with applicable regulations (WWMD Ordinance, Upgrade Program Standards and Public Health Code).
- f. Construction Observation - Director of Health representative(s) will visit the site as appropriate to review and sign off (if appropriate) regarding general conformance of the repair/improvement.
- g. Record Drawings - The installer prepares record drawings and submits to Director of Health in a format acceptable to Director of Health, with a copy to the WPCA.
- h. Permit to Discharge - Upon successful completion of the upgrade and receipt of record drawings, Director of Health issues a Permit to Discharge to the property owner, with a copy to the WPCA.
- i. Payment - The owner arranges payment for the upgrade with the installer.