



SNOHOMISH COUNTY BOARD OF HEALTH AGENDA

August 12, 2025

3:00 PM

Auditorium, 3020 Rucker Ave, Everett, WA 98201 or Remote:

<https://us02web.zoom.us/j/87098263636>

- 1. Call to Order**
 - 2. Roll Call**
 - 3. Approval of Agenda Contents and Order**
 - 4. Approval of Minutes**
 - a. Approval of minutes of the regular meeting of July 8, 2025
 - 5. Public Comment**
 - 6. Action**
 - a. Board of Health consumer of public health appointment recommendation (SR 25-019; Nicole Thomsen)
 - 7. Director's Report**
 - 8. Briefings**
 - a. Ordinance 25-07 Reorganizing title 5 of the Board of Health code (SR 25-020; Hailey Fagerness)
 - b. Community Navigator program presentation (SR 25-021; Cristina Ciupitu-Plath)
 - c. Immunizations and vaccination panel (SR 25-022; James Lewis)
 - 9. Old Business**
 - 10. New Business**
 - 11. Information Items**
 - a. Upcoming meetings
 - 12. Adjournment**
-

Board of Health members:

Jared Mead, Megan Dunn, Heather Logan, Dale Kaemingk, Lisa George, Janet Anderberg, Desmond Skubi, Summer Hammons

The public is invited to attend. Parking and meeting rooms are accessible for persons with disabilities. Questions or additional information about the board meeting may be obtained by contacting Sarah de Jong at 425.339.5210; Relay: 711; Email sarah.dejong@co.snohomish.wa.us. To request reasonable accommodations, please contact Ms. de Jong by the Friday prior to the board meeting.



BOARD OF HEALTH STAFF REPORT ()
AUGUST 12, 2025
APPROVAL OF MINUTES

Approval of minutes of the regular meeting of July 8, 2025

Division:

Office of the Director / Sarah de Jong, Clerk of the Board

ATTACHMENTS:

Description

- ▢ Draft Minutes - July 8, 2025

**Snohomish County Board of Health
Board of Health Minutes
July 8, 2025**

The regular meeting was held in the auditorium of the Rucker Building and via Zoom conference call/video.

Members Present

Megan Dunn, Chair
Heather Logan, Vice Chair
Dale Kaemingk
Desmond Skubi
Janet Anderberg
Jared Mead
Lisa George
Summer Hammons

Members Absent

None

Call to Order

The regular meeting of the Board of Health was called to order using a hybrid setting at 3:02 p.m. by Ms. Megan Dunn.

Roll Call

Roll call was taken by Ms. Sarah de Jong who reported there was a quorum present.

Approval of Agenda Contents and Order

It was moved by Ms. Heather Logan and seconded by Ms. Janet Anderberg to amend the agenda to include a special presentation by Representative Rick Larson before public comments. The motion passed unanimously.

Approval of Minutes

It was moved by Ms. Lisa George and seconded by Ms. Logan to approve the minutes of the regular meeting of May 13, 2025. The motion passed unanimously.

Public Comment

Ms. Dunn opened the floor for public comment. No member of the public wished to speak and Ms. Dunn closed the public comment period.

Special Presentation

Representative Rick Larsen provided a special presentation regarding Medicaid and the potential effects the "Big Beautiful Bill" could have on it.

Public Hearings

Ordinance BOH25-05 relating to health department fees; amending chapter 1.40 of the Snohomish County Board of Health Code (SR25-015B; Hailey Fagerness)

Healthy Communities Specialist Hailey Fagerness shared two changes to ordinance that were made since this item was introduced at the May Board of Health meeting. Mr. Desmond Skubi expressed an interest to better understand how fees are set and the gap between the fee and actual operating costs. Staff shared that they are able to accommodate that request, likely in October or November of this year. Ms. Janet Anderberg noted

the section that speaks to food worker cards does not list the 5-year card option and would like the ordinance amended to reflect that. As this item involves fees, the Board chose to perform an advisory vote of all board members before the official vote by the elected members.

It was moved by Ms. George and seconded by Mr. Jared Mead to have an advisory vote in support of BOH25-05. The motion passed unanimously.

It was moved by Ms. Logan and seconded by Mr. Mead to approve Ordinance BOH25-05.

It was moved by Ms. Logan and seconded by Mr. Mead to amend the ordinance to add the 5-year food handling card option in the appropriate section. The amendment was passed unanimously.

The amended ordinance was approved with 4 ayes, 0 nays, and 0 absent.

Ordinance BOH25-06 relating to variances and waivers (SR 25-017B; Hailey Fagerness)

Ms. Fagerness provided a brief overview of this item and shared the non-substantive changes have been made since this item was last presented. Ms. Dunn opened the public hearing. No member from the public wished to speak and Ms. Dunn closed the public hearing.

It was moved by Ms. Logan and seconded by Mr. Mead to approve Ordinance BOH25-06. The motion passed with 8 ayes, 0 nays, and 0 absent.

Action

Proclamation 25-05 recognizing August 2025 as National Immunization Awareness Month (SR 25-05; James Lewis)

Dr. James Lewis provided a briefing on the department's immunization program. Ms. Nicole Thomsen read aloud the proclamation

It was moved by Mr. Desmond Skubi and seconded by Mr. Dale Kaemingk to approve Proclamation 25-05. The motion passed unanimously.

Director's Report

Interim Director Pamela Aguilar shared updates on the search for a new department director.

Health Officer's Report

Dr. James Lewis provided an update on public health matters nationally as well as in Snohomish County.

Old Business

New Business

Information Items

Upcoming Meetings

Ms. Dunn reviewed the dates of the next Board of Health meetings.

Adjournment

The meeting was adjourned at 4:36 p.m.

Megan Dunn
Board of Health, Chair

Pamela Aguilar, Interim Director

Board of Health consumer of public health appointment recommendation (SR 25-019; Nicole Thomsen)

Division:

Office of the Director / Nicole Thomsen, Public Affairs & Policy Manager

Background

After a thorough recruitment process to fill the Consumer of Public Health seat, which has been vacant since February 2025, we are pleased to present for recommendation Ms. Mindy Woods. Ms. Woods brings a wealth of lived experience to this role. She has a strong track record of community engagement, including her previous service on the Community Equity Advisory Board, and is a dedicated change agent in the areas of diversity, equity, inclusion, and anti-racism. Her valuable perspective will be a significant asset to the board.

In compliance with Snohomish County Code 2.300.120, Ms. Woods is eligible to serve the remainder of the current four-year term, which concludes in December 2028.

If the recommendation is approved today, it would then move forward to the Executive's Office for final recommendation to the County Council.

Board Authority

RCW 70.05.060 – Powers and duties of local board of health and Snohomish County Code chapter 2.300

Recommended Motion

MOVE TO approve recommendation for the appointment of Mindy Woods to the Board of Health for the continuation of the four-year term.

Ordinance 25-07 Reorganizing title 5 of the Board of Health code (SR 25-020; Hailey Fagerness)

Division:

Environmental Health / Hailey Fagerness, Healthy Communities Specialist

Background

The proposed ordinance repeals and replaces the current Title 5 of the Snohomish County Board of Health Code, which governs onsite sewage systems (OSS), commonly known as septic systems. The proposed new layout does not introduce significant policy changes; instead, it reorganizes and streamlines the content from the repealed Title 5 to improve the usability, structure, and consistency of these regulations for OSS contractors, Health Department staff, and the public.

The key changes reflected in this new layout include:

- Adding a general provisions chapter (5.05) – establishes a consistent framework that includes purpose and applicability, state rule adoptions, definitions, and information about waivers, fees, and appeals. There is one new policy element: a section on Historic and Archaeological Sites (5.05.090), which clarifies compliance with Snohomish County Code for historic and archaeological resources.
- Reviewing and reordering chapters – permitting content is now grouped at the beginning of Title 5, followed by monitoring and maintenance content at the end of Title 5, to reflect the general progression of OSS system oversight. Vertical separation chapter (formerly 5.10) is removed, as its content is now fully addressed in the adopted OSS WAC.
- Merging rules for septic contractors into one, streamlined chapter - former chapters 5.40, 5.50, 5.55, and 5.70 have been merged into a single chapter (5.55). This chapter now covers all OSS contractors, including installers, pumpers, and monitoring and maintenance specialists.
- Updating terminology, grammar, and clarity across all chapters, as needed. Streamlining repetitiveness and redundancy across all chapters, as needed.

This update is the first step of a broader effort to update Title 5 in phases. This layout is intended to accommodate future rule revisions and new policy additions that may be necessary.

Board Authority

RCW 70.05.060 (3) Enact such local rules and regulations as are necessary in order to preserve, promote and improve the public health and provide for the enforcement thereof.

Recommended Motion

No motion required. Briefing only.

ATTACHMENTS:

Description

- Ordinance BOH25-07: Reorganizing Title 5 of the Board of Health Code

SNOHOMISH COUNTY BOARD OF HEALTH
Snohomish County, Washington

ORDINANCE NO. BOH25-07

REPEALING AND READOPTING TITLE 5 OF THE BOARD OF HEALTH CODE TO
REORGANIZE AND CONSOLIDATE WASTEWATER REGULATIONS

WHEREAS, under RCW 70.05.060(3), the Snohomish County Board of Health has authority to enact such local rules and regulations as necessary in order to preserve, promote, and improve the public health and provide for the enforcement thereof; and

WHEREAS, the Snohomish County Board of Health has determined that a reorganization of the existing Title 5 of the Snohomish County Board of Health Code is necessary to improve clarity and effectively communicate the local rules and regulations to the people of Snohomish County;

NOW, THEREFORE, BE IT ORDAINED:

Section 1. Snohomish County Board of Health Code Title 5, *Wastewater*, consisting of Chapters 5.05, 5.10, 5.15, 5.20, 5.25, 5.30, 5.35, 5.40, 5.50, 5.55, 5.60, 5.65, and 5.70 is repealed.

Section 2. A new Title 5 is added to the Snohomish County Board of Health Code to read:

Title 5
WASTEWATER

Chapters:

- 5.05 General Provisions
- 5.10 Permit Application and Installation Procedures for New On-Site Sewage Systems
- 5.11 On-Site Sewage System Design and Record Drawings (As-Built) Standards
- 5.15 Repairs and Remodels
- 5.20 Land Division Review
- 5.25 Community Systems
- 5.30 Use of Sand Filter System/Mound System on Sites with 12 Inches to 18 Inches of Suitable Soil, Use of Boot with Sand Filter Liner
- 5.55 On-Site Sewage System Contractor Regulations

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Chapter 5.05 GENERAL PROVISIONS

Sections:

- 5.05.010 Authority and purpose.
- 5.05.020 Applicability.
- 5.05.030 Adoption of state rules and regulations.
- 5.05.040 Snohomish County board of health on-site sewage system regulations.
- 5.05.060 Waiver requests.
- 5.05.070 Fees.
- 5.05.080 Appeals.
- 5.05.090 Historical and archeological discovery.

5.05.010 Authority and purpose.

- A. *Authority.* The board of health adopts these regulations under the authority of chapters 70.05, 70A.105, and 70A.110 of the Revised Code of Washington (RCW) and chapter 246-272A of the Washington Administrative Code (WAC).
- B. *Purpose.* The purpose of these regulations is to protect the public health by:
 - 1. Eliminating or minimizing the potential for public exposure to sewage from on-site sewage systems (OSS);
 - 2. Eliminating or minimizing adverse effects to public health that discharges from OSS may have on ground and surface waters; and
 - 3. Establishing minimum standards of sanitation for sewage.

5.05.020 Applicability.

This title shall apply to on-site sewage systems for treatment, siting, design, installation, operation and maintenance measures treating sewage and dispersing effluent from residential sources with design flows up to 3,500 gallons per day.

This title may apply to OSS for nonresidential sources of sewage if treatment, siting, design, installation, and operation and maintenance measures provide treatment and effluent dispersal equal to that required of residential sources.

It is the specific intent of this title to place the obligation for complying with these regulations upon property owners, or occupants, where sewage originates and/or sewage producers, sewage contractors, or other persons as applicable under this title. If any provision of this title conflicts with any other local or state regulations, the more stringent shall apply.

1
2 **5.05.030 Adoption of state rules and regulations.**

3
4 Chapter 246-272A WAC, On-Site Sewage Systems, is adopted by reference, as now in
5 effect or hereafter amended.
6

7 **5.05.040 Snohomish County board of health on-site sewage system**
8 **regulations.**

9
10 The provisions of chapter 246-272A WAC together with any provision found in this title
11 shall be the Snohomish County Board of Health On-Site Sewage System Regulations.
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13 **5.05.060 Waiver requests.**

14
15 Requests for a waiver from the requirements of this title must comply with WAC 246-
16 272A-0420, as now in effect or hereafter amended, and follow the waiver application
17 process established in SCBHC 1.05.100. In addition, requests for a waiver from the
18 requirements of chapter 246-272A WAC will be reviewed and decided in accordance
19 with Washington State Department of Health publication number 337-021, titled
20 "Granting On-site Sewage System Waivers," dated April 2025 or as hereafter amended.
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22 **5.05.070 Fees.**

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24 Fees related to wastewater shall be determined and periodically reviewed by the board
25 of health. Such fees shall be codified in chapter 1.40 SCBHC.
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27 **5.05.080 Appeals.**

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29 Any aggrieved person may appeal a final administrative decision, final determination, or
30 final order made by the health officer or a health department official in the
31 administration, interpretation, or enforcement of this title in accordance with the appeal
32 procedures under chapter 1.20 SCBHC, Right of Appeals, as now in effect or hereafter
33 amended.
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35 **5.05.090 Historic and archaeological discovery.**

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37 On-site sewage systems must be designed and installed in compliance with chapter
38 30.32D of the Snohomish County Code (SCC), Historic and Archaeological Resources,
39 as now in effect or hereafter amended.
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Chapter 5.10
PERMIT APPLICATION AND INSTALLATION PROCEDURES FOR NEW ON-SITE
SEWAGE SYSTEMS

Sections:

- 5.10.010 Purpose.
- 5.10.020 Permit.
- 5.10.030 Installation.

5.10.010 Purpose.

The process herein described relates to the permit process for application proposals for construction of new on-site sewage systems. This process does not apply to an application to repair, replace, or alter an existing on-site sewage system.

- A. Applications for a new on-site sewage system must be submitted to the health department along with payment of review fees, as set forth in chapter 1.40 SCBHC. The proposed OSS must be designed by a certified designer or professional engineer.
- B. A review is conducted in accordance with sewage disposal/water supply requirements and department procedures. Upon review of the application, the health department shall issue a written decision approving or denying the application. An approved application is valid for two years and can be renewed for an additional two-year period, with written concurrence from the system designer, review, and approval from the health department and payment of a renewal fee.

5.10.020 Permit.

- A. Upon receipt of a request for building permit clearance for the subject use from the city or county building department, a permit to install the approved on-site sewage system will be approved for issuance provided the building department site plan and the health department site plan are compatible.
- B. The on-site sewage system permit is valid only when issued concurrently with the building/development permit. The permit will then remain valid for the term of the building/development permit. Expiration or termination of the building/development permit will cause the on-site sewage system permit to expire. Renewal of an expired on-site sewage system permit will require submittal of a new application and payment of fees, as set forth in chapter 1.40 SCBHC.
- C. In no case will an on-site sewage system permit be issued prior to issuance of the building permit for the proposed structure.

5.10.030 Installation.

- A. The health department shall require certified installers to construct the on-site sewage system, except as noted under SCBHC 5.55.120. In all cases, construction of the on-site sewage system shall include system back fill and final grading.
- B. The health officer may allow the owner of a single-family residence to install the on-site sewage system for his/her single-family residence when:
 1. The on-site sewage system is a conventional gravity; and
 2. A certified installer performs all installation work not done by the resident owner.
- C. The installer shall:
 1. Follow the approved design. Design revisions must have the concurrence of the designer and the health department before commencing work;
 2. Have the approved design and permit in possession during installation;
 3. Be on the site at all times during the construction of the on-site sewage system;
 4. Install the on-site sewage system to be watertight, except for the disposal component;
 5. Upon completion, post the permit on site in a conspicuous location until such time as the health officer has granted final approval;
 6. Cover the installation only after the health officer has given approval to cover; and
 7. Back fill and grade the site to prevent surface water from accumulating over any component of the on-site sewage system.

Chapter 5.11

ON-SITE SEWAGE SYSTEM DESIGN AND RECORD DRAWINGS (AS-BUILT) STANDARDS

Sections:

- | | |
|----------|---------------------------------------|
| 5.11.010 | Purpose. |
| 5.11.020 | Site identification and preparation. |
| 5.11.030 | Application and design procedures. |
| 5.11.040 | Record drawings (as-built) procedure. |
| 5.11.050 | Deficiencies. |

5.11.010 Purpose.

A completed application shall consist of adequate written and physical site information to support the issuance of a permit for an on-site sewage system. Such information must be presented in the prescribed written format and the proposed site prepared in sufficient detail to allow visual examination of its characteristics. A uniform presentation format is intended to provide consistent evidence of compliance with chapter 246-272A WAC, On-Site Sewage Systems.

5.11.020 Site identification and preparation.

- A. Property line shall be identified by corner flagging.
- B. Access to the on-site sewage system site shall be flagged and identified with the applicant's name or property tax account number.
- C. The path to the on-site sewage system site shall be flagged and cleared.
- D. Drainfield and reserve area must be sufficiently cleared so as to make ground surface contours easily observable. Further staking of proposed laterals may be necessary to demonstrate the feasibility of installation.
- E. All soil log test holes shall be flagged and numbered to correspond with the lot number and soil log number as shown on the design. If soil log test holes are part of a proposed short plat, soil log test hole identification shall include the proposed lot number.
 - 1. Soil log test holes shall be placed so as to demonstrate representative soil types in the on-site sewage system area and reserve area.
 - 2. Provide for each single-family dwelling a minimum of three soil log test holes in representative parts of the on-site sewage system area and two soil log test holes in the reserve area. Drainfield areas other than for a single-family residence must have at least two soil log test holes for every 500 square feet of disposal area and in no case shall there be less than four soil log test holes.
 - 3. Separate soil log test holes by at least 50 feet.
 - 4. Soil log test holes shall be constructed, identified, and maintained to prevent injury or damage to the general public.
 - 5. Soil log test holes must be dug to the appropriate depth to justify meeting current minimum vertical separation requirements.
 - 6. Soil log test holes shall be of sufficient diameter for the reviewer to obtain representative samples from the soil profile and determine soil color, texture, structure of each horizon and the water table.
 - 7. Soil log test holes must be kept open for inspection until review by a health department official.
 - 8. After health department application review has been completed, the property owner/designer is responsible for backfilling and covering soil log test holes on the property.
 - 9. Additional tests, in accordance with WAC 246-272A-0220, may be required if in the opinion of the health officer they are necessary for proper soil evaluation of a specific site.
- F. If a mound system or any other type of bed is being proposed, the four corners of the mound basal area or bed corners shall be staked or flagged and labeled as "mound corner" or "bed corner." Additionally, the mound or bed reserve area shall be flagged or staked and identified.

5.11.030 Application and design procedures.

When applying for an on-site sewage system permit, the applicant shall:

- A. Complete the application for an on-site sewage system permit form including the following information:
 1. Directions to the subject property (include vicinity map if needed);
 2. Address or approximate address of property;
 3. Barriers that might limit or restrict access to the site including, but not limited to:
 - a. Locked fences or gates;
 - b. Animals on the premises;
 - c. Unpaved, obstructed, or undeveloped access roads;
 - d. The need to schedule an on-site meeting;
 4. Name of current owner and name of system designer;
 5. Type of building proposed. If other than single-family residence, include estimated daily wastewater flow;
 6. Soil and site evaluation completed in accordance with WAC 246-272A-0220;
 7. Identification of the source of domestic water:
 - a. If public water (any source other than an individual supply serving one single-family residence) is provided, identify by name and include a letter from the purveyor confirming water availability and commitment to serve; or
 - b. If an individual water supply (well) is proposed, the proposed well site must be shown on the design in relation to the proposed drainfield areas. In addition, a well site application (detailing the well site and its 100-foot pollution control zone) may be submitted for concurrent review;
 8. Trench depth, width, and required square footage of drainfield;
 9. If an alternative system is proposed, include all information, construction details, calculations, etc., as required in the DOH Department Standards and Guidance, as well as any specific health department requirement;
 10. Signature of designer and date of field testing; and
 11. Any redesign submittals reflecting changes to the application cover sheet must be accompanied by a new design packet.
- B. Complete and submit an on-site sewage system design and site plan including:
 1. A dimensional site plan drawn to a scale which shows one-inch to be equal to no more than 30 feet. Indicate compass direction by using a north arrow. If the entire parcel/lot cannot be included on a one-inch equals 30 feet scale, an overall site plan of the lot including location of residence, drainfield and easement (if proposed) shall be required in a smaller scale in addition to the one-inch equals 30 feet (i.e., one-inch equals 100 feet);
 2. If a short plat is proposed an overall site plan indicating the layout of the lots (in relation to each other) shall be submitted in addition to the individual designs;

3. Identification of elevations at soil log test holes and topographical contours at two feet intervals in the drainfield and reserve area;
4. Identification and location of wells, other sources of potable water, and other surface water bodies within 100 feet of property lines;
5. Identification and location of soil log test holes;
6. The proposed on-site sewage system and proposed site of the structure shall be located by giving dimensions to at least two intersecting property lines. Show driveway parking and any other proposed paving locations;
7. Any proposed well site shall be shown together with the minimum circular area of protection having a radius no less than 100 feet;
8. Construction plan specifications to include:
 - a. Plumbing stub-out elevation in relation to a documented reference point;
 - b. A minimum and maximum trench depth;
 - c. An expected amount of cover soil required;
 - d. The lateral lengths and method of distribution; and
 - e. Location of interceptor, curtain or footing drains, dosing system specifications, etc.;
9. Show all required separations as required under WAC 246-272A-0210;
10. All drainfield laterals shall be shown as dashed lines with tightlines shown as solid lines;
11. Reserve area boundaries shall be labeled and shown by outlining, or by shading of the area or showing the laterals using double dashed lines and identifying as reserve;
12. If an alternative system is proposed include all information, construction details, calculations, etc., as required in the applicable DOH Department Standards and Guidance, together with any specific health department requirements;
13. Design shall include a trench/slope cross-section detail demonstrating compliance with minimum vertical separation and trench depth requirements;
14. Design shall show all existing and proposed structure locations to ensure all setback requirements are met; and
15. Other information determined to be necessary to process the application.

5.11.040 Record drawings (as-built) procedure.

Whenever a designer has approved an installation, a completely scaled and dimensional as-built plan of the approved on-site sewage system shall be prepared by the designer of the system. Record drawing forms, provided by the health department shall be completed and signed by the designer and, within 30 days, forwarded to the health department. In addition to the requirements outlined in WAC 246-272A-0265, the following plan details are required:

- A. Location of the essential components of the on-site sewage system including:
 1. Septic tank;
 2. All plumbing stub outlets;

3. Tightline between buildings and septic tank;
 4. Tightline between septic tank and distribution box, inspection box, or drainfield line;
 5. Distribution box;
 6. All drainfield lines. The length of each individual drainfield shall be shown together with the total number of lineal feet of drainfield line;
 7. The location of any construction feature, such as a stepdown, must be clearly indicated;
 8. Distances between drainfield lines and the edges of any cuts, banks, property lines, lakes, streams, wells, driveways, water lines, fills, interceptor ditches;
 9. Location, size, shape and placement of all structures on the building site showing their relative location to the on-site sewage system and to any easements, water service supply lines, property lines, etc.;
 10. Location, direction of flow, and discharge point of all ground or surface water interceptor drains;
 11. Orientation of drawing with north direction by arrow;
 12. Pump model number and manufacturer if applicable; and
 13. Pump chamber size and dose volume if applicable.
- B. Alternative system as-builts shall include applicable items described in subsection (A) of this section together with an owner's operational manual as required in the appropriate DOH guideline and as specified in the conditional approval letter.
- C. Location, size, and dimensions of the 100 percent reserve area shall be shown in relation to the on-site sewage system components, listed in subsection (A) and (B) of this section.
- D. Clearly indicate scale. Recommended scale is one-inch equals 20 feet. Scales utilizing ratios in excess of one-inch equals 30 feet are not acceptable.
- E. If the entire parcel/lot cannot be included on a one-inch equals 30 feet scale, an overall site plan of the lot including house and drainfield location as well as the easement (if necessary) shall be required in addition to the detail one-inch equals 30 feet design.

5.11.050 Deficiencies.

Failure to meet all of the above requirements may result in further submittal/inspection and/or payment of additional fees.

Chapter 5.15 REPAIRS AND REMODELS

Sections:

- 5.15.010 Authority.
- 5.15.020 Purpose.
- 5.15.030 Applicability.

1 5.15.040 Remodeling approval required.

2
3 **5.15.010 Authority.**

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5 The regulations in this chapter are established pursuant to authority vested in the board
6 of health by RCW 70.05.060 and WAC 246-272A-0013. The regulations are adopted for
7 the protection of public health through the mechanism of providing guidance to the
8 health officer with regard to the applicability of chapter 246-272A WAC to proposed
9 remodeling projects and construction of structures other than residences.

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11 **5.15.020 Purpose.**

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13 These rules and regulations are enacted as an exercise of the powers and duties of the
14 board of health to preserve, promote, and improve the public health. The provisions
15 herein shall be liberally construed for the accomplishment of these purposes. It is the
16 specific intent of these rules and regulations to prevent the development of any
17 property, to which a public sanitary sewer is not available, to such an extent or in such a
18 manner whereby the amount of any sewage produced on the property would exceed the
19 property's ability to dispose of and treat said sewage effluent in a manner consistent
20 with chapter 246-272A WAC.

21
22 **5.15.030 Applicability.**

23
24 Chapter 246-272A WAC shall apply whenever development or construction of a
25 structure is proposed on any property to which a sanitary sewer is not available and to
26 which water under pressure can be made available.

27
28 **5.15.040 Remodeling approval required.**

29
30 All existing buildings or structures to which additions, alterations, or improvements are
31 made after the effective date of these policies and procedures shall be served by an on-
32 site sewage system complying with chapter 246-272A WAC; provided, however, the
33 health officer may waive compliance with these requirements for existing buildings or
34 structures when additions, alterations, repairs, or improvements to the building or
35 structure are compatible with and do not adversely impact the existing on-site sewage
36 system and potential reserve grainfield area, the system is adequate to treat the on-site
37 sewage expected to be generated over the remaining useful life of the structure, and the
38 continued operation of the system will not adversely affect public health, surface water
39 quality, or groundwater quality.

40
41 A. Application for approval by the health officer of an existing on-site sewage system
42 serving an existing building undergoing addition, alteration, repair, or improvement

shall be made as provided in this section. The application shall be made on forms provided by the health officer.

B. The health officer shall review all applications to determine compatibility of the proposed addition, alteration, repair, or improvement with the existing on-site sewage system.

1. Factors that must be considered shall include, but not be limited to, the following:

- a. Location of septic tank and grainfield in relation to existing foundation and proposed improvements;
- b. Size of drainfield in relation to proposed use;
- c. Condition of existing on-site sewage system;
- d. Useful anticipated life of the existing on-site sewage system;
- e. Potential for reconstruction, replacement, and/or repair of the existing on-site sewage system;
- f. Ultimate purpose of the remodeling;
- g. Approved source of water; and
- h. Potential use or change of use of the structure after remodeling.

2. The health officer may require the applicant to furnish such exhibits and information as may be deemed relevant and necessary to the application.

C. After reviewing the application, the health officer shall notify the building authority and applicant that either:

1. The application is approved; or
2. Correction is required to accommodate the application's approval; or
3. The application is disapproved and the reasons therefor.

Chapter 5.20 LAND DIVISION REVIEW

Sections:

- | | |
|----------|-------------------------------------|
| 5.20.010 | Authority. |
| 5.20.020 | Purpose and policy. |
| 5.20.030 | Background. |
| 5.20.040 | Definitions. |
| 5.20.050 | Short subdivision review procedure. |
| 5.20.060 | Subdivision review procedure. |
| 5.20.070 | Restricted use of easements |

5.20.010 Authority.

To protect the public health, these regulations are established pursuant to authority vested in the board of health by RCW 70.05.060 and WAC 246-272A-0013. Nothing contained in this chapter shall be construed to prevent the health officer from requiring

compliance with more stringent requirements than those contained herein where more stringent requirements are essential to maintain a safe and sanitary condition.

5.20.020 Purpose and policy.

In accordance with state and local requirements, the health department is obligated to assess a proposed land division for compliance with chapter 246-272A WAC as well as chapters 6.05 through 6.20 and title 5 SCBHC. These regulations require that each lot of a proposed land division be capable of supporting an on-site sewage system and 100 percent reserve area within the proposed lot line boundaries. Additionally, the regulations contain specific requirements concerning the location of existing and proposed water wells and approved source of potable drinking water.

5.20.030 Background.

The following process is established pursuant to chapters 6.05 through 6.20 and title 5 SCBHC, prescribes minimum requirements and standards for the use of on-site sewage systems in land divisions, prescribing data to be disclosed to the environmental health division concerning the proposed land division, and setting forth information to be furnished to the environmental health division prior to any request for the health department to make preliminary and final recommendations to municipal land use authority for the approval of a particular land division.

5.20.040 Definitions.

In addition to the definitions found in chapter 246-272A WAC, the following shall apply to this chapter:

“Short subdivision” means a division or redivision of land into four or less lots.

“Subdivision” means a division or redivision of land into five or greater lots.

5.20.050 Short subdivision review procedure.

A. Method A – Soil survey.

1. *Preliminary short subdivision review requirements and report.* An application requesting the health department to conduct a preliminary short subdivision review is received from a certified on-site sewage system designer or professional engineer. Application is made on the health department form “Septic Subdivision Review Application” and shall provide information as prescribed in WAC 246-272A-0320, Developments, subdivisions and minimum land area requirements.

- a. At a minimum, the application must include the following:

- 1 (i) Applicable review fees, as set forth in chapter 1.40 SCBHC, under
2 Subdivision of Property: Short Subdivision, a) Preliminary Soil Survey.
- 3 (ii) One copy of the preliminary subdivision plat map showing: scale, north
4 arrow, proposed lot layout, proposed lot sizes, general dimensions of lots,
5 easements, existing structures, location of all existing on-site sewage
6 systems and reserve areas, general contours, streams, and surface
7 water within 100 feet of the project site, proposed well sites, wells within
8 200 feet of the project site and location of soil log test holes.
- 9 (iii) Engineer or certified designer's description of soil profile from at least two
10 soil log test holes on each proposed lot. Soil log test hole identification,
11 flagging, construction, and maintenance as well as soil descriptions shall
12 be consistent with the requirements contained in title 5 SCBHC.
- 13 (iv) Proposed source of potable drinking water.
- 14 b. Proposed lot corners are to be flagged and identified on site prior to health
15 department site review.
- 16 c. If nonpublic wells are proposed, WAC 246-272A-0320(2)(b) requires
17 configuration of each lot line to allow a water supply protection zone to fit
18 within the proposed lot lines; or water supply protection zones on more than
19 one lot when the person proposing the subdivision or development provides a
20 copy of a recorded restrictive covenant to each property that is sited partially
21 or completely within the water supply protection zone. In all cases a water
22 supply protection zone of at least a 100-foot radius for each existing or
23 proposed well site is required.
- 24 d. If a new community/public well is proposed, an application for public well site
25 inspection must be submitted, reviewed, and approved by the health
26 department. Prior to final short subdivision approval, the public water supply
27 must be constructed and approved by the health department and, when
28 applicable, by the Washington State Department of Health.
- 29 2. *Final short subdivision review requirements.* Application requesting the health
30 department to conduct a final short subdivision review is received from a certified
31 on-site sewage system designer or professional engineer with required
32 information as prescribed in WAC 246-272A-0320. Application is made on the
33 health department form "Septic Subdivision Review Application."
- 34 a. At a minimum, the application must include the following:
- 35 (i) Applicable review fees as set forth in chapter 1.40 SCBHC, under
36 Subdivision of Property: Short Subdivision, b) Final Review and
37 Recording.
- 38 (ii) One copy of the final short subdivision plat map showing: scale, north
39 arrow, final lot layout, lot sizes, dimensions of lots, roads, storm water
40 control features, easements, existing structures, all existing on-site
41 sewage systems and reserve areas, general contours, streams, and
42 surface water within 100 feet of the project site, wetlands, native growth

- 1 protection areas, proposed well sites, wells within 200 feet of the project
2 site and location of soil log test holes.
- 3 (iii) Description of soil profiles from five soil log test holes located in the
4 proposed on-site sewage system primary and reserve area on each
5 proposed lot. Soil log test hole identification, flagging, construction, and
6 maintenance as well as soil descriptions shall be consistent with the
7 requirements contained in title 5 SCBHC.
- 8 (iv) Scaled site designs for each proposed lot demonstrating sufficient area
9 for on-site sewage system and reserve area, lot lines, easement lines,
10 road locations, wells, surface waters, drainage features, sensitive areas,
11 and features which may impact the placement of the on-site sewage
12 system.
- 13 b. Lot corners must be surveyed and staked, all roads cut in, and any storm
14 water drainage system installed.
- 15 c. If nonpublic wells are proposed, WAC 246-272A-0320(2)(b) requires
16 configuration of each lot line to allow a water supply protection zone to fit
17 within the proposed lot lines; or water supply protection zones on more than
18 one lot when the person proposing the subdivision or development provides a
19 copy of a recorded restrictive covenant to each property that is sited partially
20 or completely within the water supply protection zone. In all cases a water
21 supply protection zone of at least a 100-foot radius for each existing or
22 proposed well site is required.
- 23 d. If a new community/public well is proposed, the public water supply must be
24 constructed and proven adequate. Approval by the health department and,
25 when applicable, by the Washington State Department of Health must be
26 received prior to recording.
- 27 e. If an existing public water supply will serve the subdivision, the water system
28 expansion must be approved by the regulatory authority and a letter of
29 availability from the water system purveyor must be submitted.
- 30 B. *Method B – Individual applications for on-site sewage disposal permit – Preliminary*
31 *and Final Short Subdivision Review Process.* Applications for on-site sewage
32 permits are submitted for each of the proposed lots by a certified designer or
33 professional engineer.
- 34 1. Payment of applicable review fees as set forth in chapter 1.40 SCBHC.
- 35 2. Application, design preparation, soil log test hole construction, identification,
36 flagging and maintenance as well as soil descriptions shall be consistent with the
37 requirements contained in title 5 SCBHC.
- 38 3. An as-built of any existing on-site sewage system must be provided along with
39 soil logs in the reserve area for any lot that has an existing dwelling.
- 40 4. Proposed lot corners are to be flagged and identified on site.
- 41 5. If nonpublic wells are proposed, WAC 246-272A-0320(2)(b) requires
42 configuration of each lot line to allow a water supply protection zone to fit within
43 the proposed lot lines; or water supply protection zones on more than one lot

when the person proposing the subdivision or development provides a copy of a recorded restrictive covenant to each property that is sited partially or completely within the water supply protection zone. In all cases a water supply protection zone of at least a 100-foot radius for each existing or proposed well site is required.

6. If a new community/public well is proposed, an application for public well site inspection must be submitted, reviewed, and approved by the health department. Prior to final short subdivision approval, the public water supply must be constructed. Approval by the health department and, when applicable, by the Washington State Department of Health must be received prior to recording.
7. If an existing public water supply will serve the subdivision, the water system expansion must be approved by the regulatory authority and a letter of availability from the water system purveyor must be submitted.

5.20.060 Subdivision review procedure.

A. *Preliminary subdivision review requirements and report.* Application requesting the health department to conduct a preliminary subdivision review is received from a certified on-site sewage system designer or professional engineer. Application is made on the health department form "Septic Subdivision Review Application" and shall provide information as prescribed in WAC 246-272A-0320, Developments, subdivisions, and minimum land area requirements.

1. At a minimum, the application must include the following:
 - a. Applicable review fees as set forth in chapter 1.40 SCBHC, under Subdivision of Property.
 - b. One copy of the preliminary plat map showing: scale, north arrow, proposed lot layout, proposed lot sizes, general dimensions of lots, easements, existing structures, location of all existing on-site sewage systems and reserve areas, general contours, streams, and surface water within 100 feet of the project site, proposed well sites, wells within 200 feet of the project site, and location of preliminary soil log test holes.
 - c. Preliminary large long plat soil review (lots five acre minimum) applications shall include a plat map showing the location together with soil profile descriptions of the designer's or professional engineer's preliminary test pits. Backhoe pits as described in subsection (A)(3) of this section are to be provided for the health department at the time of field review.
 - d. Proposed source of potable drinking water for each proposed lot.
2. Reference points must be identified on site for the purpose of identifying map locations in the field (i.e., traverse lines, identified in field, depicted on preliminary plat map).
3. Applicant's certified designer or professional engineer will coordinate a detailed review of the site and soils with the health department representative at which

- 1 time backhoe pits or equivalent prepared and maintained in accordance with
2 WAC 246-272A-0220(3) shall be provided.
- 3 a. A backhoe should be available on site for additional holes and to backfill pits
4 after soil profiles have been recorded.
- 5 b. A minimum of one soil log per proposed lot must be provided for review.
- 6 c. Soil profile descriptions and locations are to be recorded by the designer or
7 professional engineer who shall also show the location of test pits accurately
8 on subsequent preliminary plat maps.
- 9 d. In accordance with WAC 246-272A-0220, the owner of the property or
10 owner's agent is responsible for constructing and maintaining the soil log test
11 hole excavation in a manner to prevent physical injury. The health department
12 recommends any excavation be done the same day as the soil log test holes
13 are examined. Furthermore, the health department recommends backfilling all
14 soil log test holes as soon as the soil logs are recorded, but not later than the
15 end of the day that the logs are reviewed. The health department assumes no
16 responsibility for test pit backfilling or uncovered test pits.
- 17 4. A copy of the preliminary plat map showing locations of soil log test holes are to
18 be submitted prior to health department preliminary plat recommendation to the
19 lead agency.
- 20 5. If nonpublic wells are proposed, WAC 246-272A-0320(2)(b) requires
21 configuration of each lot line to allow a water supply protection zone to fit within
22 the proposed lot lines; or water supply protection zones on more than one lot
23 when the person proposing the subdivision or development provides a copy of a
24 recorded restrictive covenant to each property that is sited partially or completely
25 within the water supply protection zone. In all cases a water supply protection
26 zone of at least a 100-foot radius for each existing or proposed well site is
27 required.
- 28 6. If a new community/public well is proposed, an application for public well site
29 inspection must be submitted, reviewed, and approved by the health department.
30 Prior to final long plat approval, the public water supply must be constructed and
31 approved by the health department and, when applicable, by the Washington
32 State Department of Health.
- 33 B. *Final subdivision review requirements.* Application requesting the health department
34 to conduct a final subdivision review is received from a certified on-site sewage
35 system designer or professional engineer with required information as prescribed in
36 WAC 246-272A-0320 and title 5 SCBHC. Application is made on the health
37 department form "Septic Subdivision Review Application."
- 38 1. At a minimum, the application must include the following:
- 39 a. Applicable review fees as set forth in chapter 1.40 SCBHC under Subdivision
40 of Property: Long Plat, Recording.
- 41 b. One copy of the final plat map showing: scale, north arrow, final lot layout, lot
42 sizes, dimensions of lots, roads, storm water control features, easements,
43 existing structures, all existing on-site sewage systems and reserve areas,

- 1 general contours, streams, and surface water within 100 feet of the project
2 site, wetlands, native growth protection areas, proposed well sites, wells
3 within 200 feet of the project site, and location of soil log test holes.
- 4 c. Scaled site design for each proposed lot demonstrating sufficient area for on-
5 site sewage system and reserve area, lot lines, easement lines, road
6 locations, wells, surface waters, drainage features, sensitive areas, and
7 features which may impact the placement of the on-site sewage system.
- 8 2. Lot corners must be surveyed and staked, all roads cut in, and any storm water
9 drainage system installed.
- 10 3. If nonpublic wells are proposed, WAC 246-272A-0320(2)(b) requires
11 configuration of each lot line to allow a water supply protection zone to fit within
12 the proposed lot lines; or water supply protection zones on more than one lot
13 when the person proposing the subdivision or development provides a copy of a
14 recorded restrictive covenant to each property that is sited partially or completely
15 within the water supply protection zone. In all cases a water supply protection
16 zone of at least a 100-foot radius for each existing or proposed well site is
17 required.
- 18 4. If a new community/public well is proposed, the public water supply must be
19 constructed and approved by the health department and, when applicable, by the
20 Washington State Department of Health.
- 21 5. If an existing public water supply will serve the subdivision, the water system
22 expansion must be approved by the regulatory authority and a letter of availability
23 from the water system purveyor must be submitted.

24 25 **5.20.070 Restricted use of easements**

26
27 For the creation of new lots, all piping, treatment devices or other facilities that
28 convey, store, treat or dispose of sewage, including replacement systems, shall be
29 located within the boundaries of the lot where the sewage originates.

30 31 **Chapter 5.25** 32 **COMMUNITY SYSTEMS**

33 **Sections:**

- 34 5.25.010 Authority and purpose.
35 5.25.020 Applicability.
36 5.25.030 Definitions.
37 5.25.040 Community on-site sewage systems.

38 39 **5.25.010 Authority and purpose.**

- 40
41 A. *Authority.* The regulations in this chapter are established pursuant to preserve,
42 promote, and improve the public health by authority vested in the board of health by
43 RCW 70.05.060 and WAC 246-272A-0013.

1
2 B. *Purpose.* These regulations are adopted for the protection of public health through
3 the mechanism of establishing design guidelines together with ongoing operation
4 and management requirements for community on-site sewage systems as further
5 defined hereinafter. The provisions herein shall be liberally construed for the
6 accomplishment of these purposes.
7

8 **5.25.020 Applicability.**
9

- 10 A. These policies and procedures shall apply to all lots, parcels, and tracts not served
11 by public sewer without regard to whether such lots, parcels, or tracts may have
12 been in existence prior to the effective date of these policies and procedures.
13 B. All existing buildings or structures served by a community on-site sewage system to
14 which additions, alterations, or improvements are proposed shall comply with
15 chapter 5.15 SCBHC and these policies and procedures.
16 C. Deviations from these policies and procedures may be granted only for repair of
17 existing, failing, on-site sewage systems which cannot meet current regulations and
18 these policies and procedures because of site limitation.
19 D. Nonexpanding, existing/approved community on-site sewage systems are exempt
20 from these policies and procedures.
21

22 **5.25.030 Definitions.**
23

24 In addition to the definitions found in chapter 246-272A WAC, the following shall apply
25 to this chapter:
26

27 “Community on-site sewage system” means any on-site sewage system having more
28 than one service with an anticipated flow of less than 3,500 gallons per day and where
29 services are located on more than one parcel of land.
30

31 “Service” means a connection to an on-site sewage system designed to serve a single-
32 family residence, commercial structure, dwelling unit, or equivalent use.
33

34 **5.25.040 Community on-site sewage systems.**
35

- 36 A. Design of these systems shall comply with chapter 246-272B WAC.
37 B. Prior to construction, plans and specifications for community on-site sewage
38 systems shall be submitted to and approved by the health officer or delegated
39 representative.
40 1. *Submission of plans and specifications.*
41 a. Before installing or entering into a contract for installing a community system,
42 an on-site sewage system application with complete plans and specifications
43 shall be submitted to and approved by the health department. Upon receipt of

- 1 written approval by the health officer or delegated representative the plans
2 and specifications shall be adhered to unless deviations are first submitted to
3 and receive written approval of the health officer or delegated representative.
- 4 b. A detailed operation and maintenance manual, fully describing the treatment
5 and systems and outlining routine maintenance procedures for proper
6 operation of the system, shall be submitted prior to final approval of the
7 system.
- 8 2. All applications, plans and specifications for new community on-site sewage
9 systems, extensions, or alterations, shall be prepared by a sewage disposal
10 designer certified with the health department or a Washington State registered
11 professional engineer.
- 12 3. Management and maintenance of community on-site sewage systems shall be
13 provided by a public agency as defined in RCW 39.34.020 acting as the
14 management authority or acting as a third-party trust if management is performed
15 by a private entity. The management system shall comply with chapter 246-272B
16 WAC, as now in effect or hereafter amended.
- 17 a. The fee for review of the proposed waste management document is set by
18 the board of health, as set forth in chapter 1.40 SCBHC.
- 19 b. The application shall be accompanied by an opinion letter from an attorney
20 licensed to practice law in the state of Washington representing that the
21 management agreement complies with all applicable laws and regulations
22 and is a valid and binding obligation of all parties thereto. The opinion letter
23 shall be in such form as the health officer or delegated representative may
24 require.
- 25 c. The management authority shall prepare a user's manual which describes the
26 responsibilities and duties of the user along with precautionary information as
27 may be necessary to preclude inadvertent abuse to the sewage system. A
28 copy of such manual shall be provided to each user at the time of purchase.
- 29 4. After approval of the application and design by the health department, an on-site
30 sewage system installation permit shall be obtained prior to installing the
31 community system. When applicable, on-site sewage disposal system installation
32 permits shall be obtained for each structure prior to the septic tank, pump, or
33 dosing tank and connecting line to the community system being installed.

Chapter 5.30

USE OF SAND FILTER SYSTEM/MOUND SYSTEM ON SITES WITH 12 INCHES TO 18 INCHES OF SUITABLE SOIL, USE OF BOOT WITH SAND FILTER LINER

Sections:

- 40 5.30.010 Sand filter system – purpose.
41 5.30.020 Sand filter liner – purpose.
42 5.30.030 Sand filter liner – standards.

1
2 **5.30.010 Sand filter system – purpose.**

3
4 The health department may approve the use of a mound system preceded by a sand
5 filter for existing legal lots of record when site conditions comply with all requirements
6 described in Recommended Standards and Guidance for Performance, Application,
7 Design and Operation and Maintenance Mound Systems, July 1, 2007.

8
9 The health department will not approve the creation of new lots, parcels, or tracts that
10 would utilize the sand filter/mound system on sites with only 12 inches to 18 inches of
11 suitable soil.

12
13 **5.30.020 Sand filter liner – purpose.**

14
15 The following standards are for the design and construction of a sand filter using a
16 synthetic membrane-lined pit with an underdrain and attached underdrain boot. These
17 standards are established to assure that the boot is used as designed by the
18 manufacturer, to assure that leakage at the boot is prevented through good design and
19 construction practice, and to allow for testing the performance of the boot installation.

20
21 **5.30.030 Sand filter liner – standards.**

- 22
23 A. The system designer is to identify the use of a sand filter liner with underdrain and
24 boot as a part of the application for on-site sewage disposal permit and provide
25 specifications detailing design and installation requirements.
26 B. The boot is to be installed by the manufacturer or the manufacturer's representative.
27 C. The boot outlet is to be bedded in sand.
28 D. The boot is to be sized to accommodate a four-inch underdrain outlet pipe.
29 E. The boot is to be secured to the four-inch outlet pipe with two stainless steel bands
30 and screws and sealant strips as recommended by the manufacturer.
31 F. The underdrain is to be designed in accordance with Recommended Standards and
32 Guidance for Performance, Application, Design, and Operation and Maintenance
33 Intermittent Sand Filter Systems, July 1, 2007, Appendix C, Underdrains, and exit
34 the side of the liner.
35 G. Sewer pipe from the sand filter to the drainfield shall be ASTM 3034 ring tight.
36 H. The trench from the sand filter to the drainfield shall be backfilled with a minimum
37 five-foot clay or hardpan dam to prevent the trench from acting as a conduit for
38 groundwater movement towards the drainfield.
39 I. During the initial implementation period of this procedure, the health department may
40 require performance testing of the sand filter/boot for leakage. The need for a
41 performance test shall be discussed and agreed upon at the preconstruction
42 conference. The performance test shall be conducted by:
43 1. Block outlet pipe.

2. Fill underdrain gravel with water.
3. Measure and record elevation of water through observation/inspection port.
4. Let stand 24 hours minimum.
5. Measure and record elevation of water through observation/inspection port.
6. No allowable drop in the water level.

Chapter 5.55 ON-SITE SEWAGE SYSTEM CONTRACTOR REGULATIONS

Sections:

- 5.55.010 Authority and purpose.
- 5.55.020 Applicability.
- 5.55.030 Definitions.
- 5.55.040 Certificate required.
- 5.55.050 Duties and obligations.
- 5.55.060 OSS contractor certification.
- 5.55.070 OSS contractor company certification.
- 5.55.080 Monitoring and maintenance inspection.
- 5.55.090 Limited repair measures.
- 5.55.100 Reporting requirements.
- 5.55.110 Installation requirements.
- 5.55.120 Health officer approval required for owner installations.
- 5.55.130 Owner's responsibility.

5.55.10 Authority and purpose.

- A. *Authority:* The board of health adopts these regulations under the authority granted in RCW 70.05.060 and chapter 246-272A WAC. WAC 246-272A-0340, authorizes the health officer to establish programs for the certification of OSS installers, monitoring and maintenance specialists, and pumpers.
- B. *Purpose:* The purpose of this chapter is to establish regulations for the certified on-site sewage system (OSS) contractor program administered by the health department, by setting forth:
 - 1. Minimum competency standards for OSS installers, monitoring and maintenance specialists, and pumpers operating within the jurisdiction of the health department;
 - 2. Specific requirements for the certification of such individuals and the activities associated with OSS installation, monitoring, maintenance, and pumping.
 - 3. Minimum requirements for reporting activities and observations related to OSS installation, monitoring, maintenance, and pumping.

1
2
3 **5.55.020 Applicability.**
4

5 The following rules contained herein apply to all persons and companies engaged in the
6 commercial activity of installing, monitoring and maintaining, and pumping all or any part
7 of the OSS.
8

9 **5.55.030 Definitions.**
10

11 In addition to the definitions found in chapter 246-272A WAC, the following shall apply
12 to this chapter:
13

14 “Certificate of competency” or “certification” means a document issued by the health
15 department indicating an individual’s satisfactory completion of the application and
16 testing procedures relative to an installer, monitoring and maintenance specialist, or
17 pumper.

18 “Certification by reciprocity” means current certification or licensure as a monitoring and
19 maintenance specialist in a local health jurisdiction with an examination process
20 deemed acceptable by the health department’s director of environmental health.
21

22 “Certified company” means a business entity which employs individuals possessing an
23 installer, monitoring and maintenance, and/or pumper certification.
24

25 “Design.” An OSS design shall consist of a complete scale drawing of the site plan
26 showing the proposed on-site sewage system installation, including all relevant values
27 and details, and using the format and application forms provided by the health
28 department. The presentation of requisite soil log test holes, information, and markers at
29 the site of the intended development is considered to be part of the design.
30

31 “DOH” means the Washington State Department of Health.
32

33 “Inspection” means a complete and thorough evaluation of OSS components and the
34 ground surface over the gravity subsurface soil absorption system (SSAS). The
35 evaluation of proprietary and nonproprietary pretreatment devices, SSAS other than
36 conventional gravity and other related components such as timers and control panels
37 must be deferred to a certified monitoring and maintenance specialist. Inspection may
38 also include other incidental activities enumerated within the supplemental procedures
39 or for which prior approval has been granted by the health department.

40 “Installer” means a person who personally holds an installer certificate issued by the
41 health department of competency and performs the actual work of installing, repairing,

1 and renovating on-site sewage treatment and disposal systems. A homeowner may act
2 in the capacity of the installer and install his/her own system in accordance with SCBHC
3 5.55.120.

4
5 “Limited repair measure” or “minor repair” means the repair or replacement of existing
6 damaged or malfunctioning OSS components as defined in WAC 246-272A-0010 under
7 “minor repair”. “Limited repair measure” as defined in title 5 SCBHC is synonymous with
8 “minor repair” as that term is defined in chapter 246-272A WAC.

9
10 “Limited repair report (for limited repair measures)” or “minor repair report (for minor
11 repairs)” means a documentation of limited repair measures or minor repair work
12 performed, submitted in the format and by the means designated by the health officer
13 within 30 days from the date of service in accordance with SCBHC 5.55.100.

14
15 “Monitoring and maintenance specialist” means a person who personally holds a
16 monitoring and maintenance certificate of competency issued by the health department
17 and performs the actual work of monitoring, maintaining, and limited repairs of on-site
18 sewage treatment and disposal systems.

19
20 “On-site sewage system contractor” or “OSS contractor” or “contractor” means a person
21 who is in possession of an installer, monitoring and maintenance specialist, or pumper
22 certificate of competency.

23 “Permit” means written approval from the health department to construct or repair an
24 OSS in accordance with an approved design and use.

25
26 “Professional development hour” or “(PDH)” means the equivalent to one hour
27 participation in trainings or seminars where the major topic is related to OSS
28 regulations, practices, or products.

29
30 “Pumper” means a person that personally holds a pumper certificate of competency
31 issued by the health department and performs the actual work of removal of septic tank
32 and/or sewage holding tank contents and the inspection and/or limited repair measures
33 of conventional gravity or pump to gravity on-site sewage systems.

34
35 “Pumper’s manual” means a manual developed and distributed by the health
36 department that outlines minimum standards, procedures, and essential information for
37 pumpers.

38
39 “Violation” means any of the following:

- 40
41 A. The construction or omission of any significant element of an on-site sewage
42 system which, if left uncorrected, may result in the malfunction of the

- 1 wastewater treatment or disposal system, or would allow the use of the
2 system to circumvent required treatment and disposal of wastewater;
- 3 B. OSS construction work that is performed without a permit or approval from
4 the health department. This includes but is not limited to: a drainfield
5 installation in violation of the applicable rules and regulations; an installation
6 not fitting the size, shape or topography of the site or its setbacks; use of
7 inadequate construction materials, devices or methods; a sewage disposal
8 system construction flaw that could allow the contamination of groundwater;
9 an on-site sewage system that is installed at an unsafe distance from a water
10 supply or surface water; OSS construction that could malfunction or allow
11 sewage to discharge to the surface;
- 12 C. Any OSS work that is performed outside the scope of that individual's
13 certificate of competency;
- 14 D. Performance of services not consistent with these regulations and health
15 department's minimum standards, procedures, and information for septic tank
16 pumpers as set forth in the pumper's manual and under chapter 246-272A
17 WAC;
- 18 E. On-site sewage system construction or repair work that is performed beyond
19 the scope of limited (minor) repair measures as defined by these regulations;
- 20 F. Failure to electronically submit limited (minor) repair reports, monitoring and
21 maintenance reports, or pumping reports to the health department no later
22 than 30 days from the date the work was completed as required by these
23 regulations;
- 24 G. Failure to electronically submit a limited (minor) repair report, monitoring and
25 maintenance report, or pumping report to the health department within 24
26 hours upon discovery of an OSS failure, or by the end of the next business
27 day, whichever is later;
- 28 H. Omission of any significant element of an of an on-site sewage system
29 monitoring inspection or maintenance activity which, if left uncorrected, may
30 result in the malfunction of the wastewater treatment or disposal system, or
31 would allow the use of the system to circumvent required treatment and
32 disposal of wastewater; or
- 33 I. Failure to truthfully report all pertinent observations and activities associated
34 with the pumping or monitoring and maintenance of an OSS.

35
36 "Violation notice" means a written determination that the named OSS installer,
37 monitoring and maintenance specialist, or pumper and/or certified company has
38 committed a violation of these rules or regulations.

39
40 "WOSSA" means the Washington On-Site Sewage Association.
41
42

1 **5.55.040 Certificate required.**

- 2
- 3 A. No person shall engage directly or indirectly in the installation, monitoring and
- 4 maintenance, or pumping on all or any part of an OSS without first having obtained
- 5 the applicable certificate of competency from the health department.
- 6 B. A certificate of competency shall be nontransferable.
- 7 C. Each certified person shall conduct their work in the employ of a certified company
- 8 appropriate to the work performed, provide to the health department the name of the
- 9 certified company with which they are employed, and shall notify the health
- 10 department within 30 days of any employment changes.
- 11 D. When complying with the requirements of this chapter, the certified person
- 12 represents the certified company with which they are employed. The certified
- 13 company, as well as the certified person, may be subject to disciplinary action for
- 14 violating the requirements of this chapter.
- 15

16 **5.55.050 Duties and obligations.**

- 17
- 18 A. *Installers.* By virtue of performing OSS construction, an installer shall comply with
- 19 the minimum requirements for on-site sewage which includes proper installation of
- 20 an approved system design in conformance with health department standards. All
- 21 installation work is subject to inspection and approval prior to use.
- 22 B. *Monitoring and maintenance specialists.* By virtue of performing OSS maintenance,
- 23 a monitoring and maintenance specialist shall comply with the minimum
- 24 requirements for OSS which includes proper OSS monitoring and maintenance in
- 25 conformance with health department standards. These standards include any
- 26 applicable health department policies, chapter 246-272A WAC, and DOH
- 27 department standards and guidance. Further, it is the monitoring and maintenance
- 28 specialist's responsibility to be knowledgeable regarding any proprietary or public
- 29 domain technologies they monitor or maintain. All maintenance work and associated
- 30 records are subject to health department inspection and review to determine
- 31 compliance with these requirements.
- 32 C. *Pumpers.* By virtue of performing OSS pumping, inspection and/or servicing, a
- 33 pumper shall comply with the minimum requirements of these rules and regulations
- 34 and chapter 246-272A WAC including proper OSS pumping, inspection, and
- 35 servicing in conformance with health department standards. These standards
- 36 include any applicable health department policies, chapter 246-272A WAC and DOH
- 37 standards and guidance. All pumping work and associated records are subject to
- 38 health department inspection and review to determine compliance with these
- 39 requirements.
- 40

41 **5.55.060 OSS contractor certification.**

- 1 A. *Qualification.* Under these regulations a person shall be subjected to testing, as is
2 further defined herein, as well as be obligated to obtain a Washington State general
3 or specialty contractor license to be a certified installer, maintenance and monitoring,
4 or pumping specialist. Each person applying for certification as a monitoring and
5 maintenance specialist must demonstrate the equivalent of two years' work
6 experience related to OSS design and/or installation. A determination by health
7 department staff that an applicant does not satisfy the qualification and experience
8 requirements of this section, may be appealed to the director of environmental
9 health whose decision shall be final and not subject to administrative appeal under
10 chapter 1.20 SCBHC, right of appeals.
- 11 B. *Term.* A certificate of competency is valid from the date of issue through December
12 31 of the year of issue unless otherwise suspended or revoked.
- 13 C. *Application and testing.* Upon the health department receiving a complete
14 application and any applicable fees, a certification of competency shall be
15 determined in the following manner:
- 16 1. Installer exam process:
- 17 a. A written exam to determine the applicant's knowledge of public health
18 problems involved in on-site treatment and disposal of sewage; of water and
19 wastewater rules, regulations and policies; of standards of design,
20 construction and installation; of soil/site evaluation; and of sewage treatment
21 theory. If the applicant scores below 70 percent on the written exam, the
22 applicant fails that exam and must wait until the next scheduled examination
23 to re-take the exam and may not continue with any other part of this
24 examination.
- 25 b. A practical field exercise consisting of the examination of a site for a proposed
26 OSS installation, at a time and place selected by the health officer, and a
27 verbal description of methods of installation, and submittal of a preliminary
28 written bid for construction of the proposed OSS including an itemization of
29 materials, equipment, and labor costs. This exercise must be taken within 90
30 days of passing the written examination and completed to the satisfaction of
31 the health officer; otherwise, the applicant will be required to retake the entire
32 testing procedure.
- 33 2. Monitoring and maintenance exam process:
- 34 a. A score of 70 percent or greater for each exam portion on the WOSSA
35 administered O&M specialist examination. Scores may not be combined to
36 achieve 70 percent; or
- 37 b. A passing score on an examination administered by a local health jurisdiction,
38 as determined by that jurisdiction, to be deemed relevant to the knowledge
39 expectations of the health department.
- 40 3. Pumper exam process:
- 41 a. A written exam to determine the applicant's knowledge of public health
42 problems involved in on-site treatment and disposal of sewage; of water and
43 wastewater rules, regulations, and policies; of these rules and regulations;

- 1 and, of standards and procedures for septic tank maintenance and limited
2 repair measures as contained in the pumper's manual. If the applicant scores
3 below 70 percent on the written exam, the applicant fails that exam and must
4 wait until the next scheduled examination to retake the exam and may not
5 continue with any other part of this examination.
- 6 b. A satisfactory oral review with the health officer of the test results completes
7 the exam.
- 8 Test results for the purpose of certification will be valid for 90 days from issuance.
9 Failure to complete requirements for a certification of competency within 90 days of
10 testing will require reapplication and reexamination unless an extension is granted
11 by the health officer.
- 12 D. *Issuance.* A certificate of competency will be issued by the health officer to qualified
13 applicants who have passed the applicable written examination, field exercise, oral
14 review, and otherwise complied with the other licensing and bonding requirements
15 contained herein demonstrating the applicant is qualified to perform OSS work
16 consistent with the certificate being sought. This certification of competency does not
17 constitute a guaranty, a warranty, or any representation by the health department of
18 specific work or performance of the certificate holder. Certificates of competency are
19 nontransferable.
- 20 1. A certificate of competency shall be issued to installers and monitoring and
21 maintenance specialists upon:
- 22 a. Determination of competency through testing as described in subsection (C)
23 of this section;
- 24 b. Proof of a current, valid general or specialty contractor license issued by
25 Washington State; and
- 26 c. Payment of the annual certification fee as set forth in chapter 1.40 SCBHC.
- 27 2. A certificate of competency shall be issued to pumpers upon:
- 28 a. Meeting the requirements set forth under subsection (D)(1)(a) through
29 (D)(1)(c) of this section;
- 30 b. Satisfactory review of the applicant's pumping equipment consistent with the
31 equipment requirements established in the pumper's manual; and
- 32 c. Confirmation of a septage dump site approved by the Washington State
33 Department of Ecology.
- 34 E. *Renewals.* Certificates of competency must be renewed annually prior to December
35 31 of the calendar year of issuance. Renewals of a certificate of competency will not
36 be charged a late fee if the applicable requirements, as set forth in subsection (E)(1)
37 or (E)(2) of this section, are met prior to the last day of February of the calendar year
38 after expiration. From March 1 through March 31, a late fee, as set forth in chapter
39 1.40 SCBHC, shall be assessed on applications for renewal. After March 31, the
40 certificate will be nonrenewable, and the OSS contractor must apply for a new
41 certification under subsection (C) of this section. An OSS contractor shall not
42 undertake any work without a current certificate of competency.

1. A certificate of competency shall be renewed to installers and monitoring and maintenance specialists upon:
 - a. Proof of a current, valid general or specialty contractor license issued by Washington State; and
 - b. Payment of the annual certification fee as set forth chapter 1.40 SCBHC.
2. A certificate of competency shall be renewed to pumpers upon:
 - a. Meeting the requirements of subsection (E)(1)(a) and (E)(1)(b) of this section;
 - b. Satisfactory review of the applicant's pumping equipment consistent with the equipment requirements established in the pumper's manual; and
 - c. Confirmation of a septage dump site approved by the Washington State Department of Ecology.
- F. *Suspension and revocation.* The health officer may suspend or revoke any certificate of competency upon determining that the OSS contractor has performed any work with negligence, incompetence, misrepresentation, or violation of the rules, regulations, guidelines, policies, or practices adopted by the health department which pertain to water supply and wastewater disposal, either existing at the time of certification or as thereafter enacted. The OSS contractor shall be notified of any issuance of violation, as well as any suspension or revocation of a certificate of competency, in accordance with SCBHC 1.05.060.
- G. *Suspension.* The certificate of competency may be suspended by the health officer for any of the following reasons:
 1. *Violation.* When the health officer finds that the OSS contractor has committed a violation of the regulations, principles, or practices of OSS installation, monitoring and maintenance, septic pumping, or system servicing, a notice of violation shall be issued. Where such violation notice constitutes the third notice of violation within any 12-month period, the OSS contractor shall also be notified of the immediate suspension of the certificate of competency.
 2. Upon finding that the conditions of the certificate of competency are no longer in effect, specifically the maintenance of the Washington State contractor license, or by the abandonment of the occupation either by relocation out of state, or by inactivity for more than one year.
 3. For committing a violation that would allow the existence of a real or potentially serious threat to the public health or to the quality of surface and groundwaters, or for making any serious, material misrepresentation of major facts as part of the construction of any OSS.
- H. *Reinstatement after suspension.*
 1. The OSS contractor may make written application for reinstatement to the health officer, specifying what practices, performance, and conditions that were named as grounds for suspension have been remedied, and a description of changes in performance that will occur which will directly avoid the repetition of past violations.
 2. The health officer, upon determining that noted deficiencies have been satisfactorily addressed, shall allow the applicable OSS contractor to schedule

- the next available test. Recertification is subject to the OSS contractor's successful completion of the application and testing procedure and payment of testing and licensing fees as per subsections (C) and (D) of this section.
3. Upon proof of reinstatement of the performance bond or contractor's license, where that is the only fault, the certificate of competency may be immediately reinstated by the health officer.
- I. *Appeal of suspension.*
1. Appeals of a suspension of a certificate of competency shall be conducted in accordance with chapter 1.20 SCBHC.
2. Suspension of the certificate of competency will be stayed pending outcome of the final hearing unless, in the opinion of the health officer, there exists an imminent health hazard that would result from the continued activity of the OSS contractor.
- J. *Revocation.* The certificate of competency may be revoked for any of the following reasons:
1. A violation of a severity and magnitude that, in the opinion of the health officer, warrants immediate revocation. Including but not limited to:
- a. The creation of an extremely serious health hazard;
- b. The concealment of major facts or pertinent information regarding OSS work;
- c. Allowing another to submit work using the name on the certificate of competency;
- d. Using the name of another certificate holder; fraudulent representation; or
- e. Asserting undue influence on or interference with health department staff.
2. When a violation has resulted in the issuance of a notice of violation beyond the second suspension of certification, the certificate may be subject to revocation by the health officer.
- K. *Revocation decision.* The health officer will not revoke a certificate of competency until an opportunity has been provided for an administrative review before the health officer or the health officer's designee. Certificates shall be revoked through issuance of a health officer's order, to be mailed to the certificate holder in accordance with SCBHC 1.05.060.
- L. *Reinstatement after revocation.* Once revoked, a certificate of competency will not be granted to the OSS contractor at any time within the subsequent three-year period from the date of notification. After the subsequent three-year period from the date of notification, the OSS contractor must apply for a new certification under subsection (C) of this section.
- M. *Appeal of revocation.* Appeals of a revocation of a certificate of competency shall be conducted in accordance with chapter 1.20 SCBHC.
- N. *OSS work without certification.* A person found to be engaging in the business of OSS installation or repair, monitoring and maintenance, pumping, inspecting, or servicing without applicable certificate of competency shall be notified by the health officer, in accordance with SCBHC 1.05.060, of these requirements. If eligible, the person is to submit for examination at the next regularly scheduled time and pay the

test and certification fee. Refusal to comply with these requirements shall make the person ineligible for certification for three years.

O. *Fees.* An applicant for a certificate of competency must submit the fees in chapter 1.40 prior to issuance of a certificate of competency. Application for reinstatement following suspension or revocation requires submittal of the appropriate annual certificate and examination fees under chapter 1.40 by the OSS contractor.

P. *Professional development hours (PDHs).*

1. Each person holding a monitoring and maintenance specialist certificate of competency shall obtain 10 PDHs per year, beginning with the first year in which they are certified for greater than 10 months. PDHs earned in excess of the 10 per year requirement may be carried over to the next calendar year. PDHs carried over expire December 31 of the year they are carried over to. It is the monitoring and maintenance specialist's responsibility to maintain adequate records concerning PDHs. The health department reserves the right of auditing PDHs at time of certificate of competency renewal.

2. Signature confirmation concerning earned PDHs must be provided on the appropriate form(s) at time of certification renewal for monitoring and maintenance specialists. The health department may audit up to 20 percent of the applicants in any calendar year concerning their PDHs by being required to document their participation in the listed events as a condition of renewal. Any person thus audited will not be audited in the next calendar year.

Q. *Good standing.* The OSS contractor must be current and in good standing on all reports and submission fees.

R. *Restrictions.* An OSS contractor certificate of competency does not allow an individual pumper to perform construction or repair work outside the scope of limited repair measures as defined in these regulations. In addition, an individual installer who also holds a designer's license may not concurrently act as both the installer and the designer of the same system.

5.55.070 OSS contractor company certification.

Each company applying for certification or recertification must satisfy the following:

A. *Fees.* Fees as adopted by the board of health must be submitted prior to issuance of an OSS contractor company certificate of competency. Application for reinstatement following suspension or revocation requires submittal of appropriate annual fee.

B. *Provider list.* Annual submittal of a list of OSS contractors who will be performing the work on the company's behalf. A minimum of one certified OSS contractor shall be required for each company.

C. *Contractor's license.* Each OSS contractor company must hold a Washington State general contractor's license or applicable specialty contractor's license. A copy of the applicable valid contractor's license must be submitted to the health department prior to initial certification and annually thereafter at time of certification renewal. The

- OSS contractor provider list shall be maintained and distributed by the health department and will be organized alphabetically by company name.
- D. *Equipment inspection.* For pumper company certification, satisfactory review of the applicant's pumping equipment consistent with the equipment requirements established in the pumper's manual.
- E. *Good standing.* Be current and in good standing on all reports and submission fees.

5.55.080 Monitoring and maintenance inspection.

- A. *Pumpers.* A monitoring and maintenance inspection conducted by pumpers involves a complete and thorough evaluation of OSS components and the ground surface of a conventional gravity or pump-to-gravity subsurface soil absorption system (SSAS) where no pretreatment or disinfection occurs. The contents of the inspection will include, but will not necessarily be limited to:
1. Condition of the septic tank, pump tank and grease trap as well as determining the need for pumping.
 2. Condition of baffles, lids, risers, and filters.
 3. Condition and operation of the pump, floats, alarm, valves, etc.
 4. Visual observation of the gravity SSAS and monitoring ports if so equipped.
- B. *Monitoring and maintenance specialists.* A monitoring and maintenance inspection conducted by a monitoring and maintenance specialist includes the evaluation of pretreatment devices, all SSAS, and other related components such as timers, control panels, and disinfection equipment, in addition to all items listed in subsection (A) of this section.

5.55.090 Limited repair measures.

- A. *General.* An OSS contractor may perform limited repair measures as defined in SCBHC 5.55.030.
- B. *Pumpers.* In addition to those items defined as limited repair measures in SCBHC 5.55.030, a certified pumper may also perform the following activities on a permitted conventional gravity or pump-to-gravity subsurface soil absorption system (SSAS), provided that no pretreatment or disinfection occurs:
1. Repair of sewage transport lines.
 2. Repair or replacement of pump, floats and/or baffle screen.
 3. Clearing of blocked sewage transport lines.
 4. Provided there exists an approved as-built for the system, repair or replace the distribution box (D-Box) on gravity systems.
- C. *Monitoring and maintenance specialists and installers.* In addition to those items listed in subsection (B) of this section and as defined under limited repair measures in SCBHC 5.55.030, certified monitoring and maintenance specialists and certified installers may also perform the following activities on a permitted OSS:
1. Repair or replacement of sewage effluent transport lines.

2. Replacement or repair of disinfection equipment such as ultraviolet light bulbs and related components.
3. Recalibration and adjustment of timer mechanisms.
4. Provided there exists an approved as-built for the system, repair or replace the distribution box (D-Box) on gravity systems.

5.55.100 Reporting requirements.

- A. OSS contractors performing monitoring and maintenance activities, pumping, and/or limited repair measures as described under this chapter, chapter 246-272A WAC, and/or in the applicable DOH Department Standards and Guidance documents, shall report the activities to the health department within 30 days of completion in the manner herein described.
- B. OSS contractors shall report the discovery of an OSS failure to the health department within 24 hours upon discovery or the end of the next business day, whichever is later.
- C. The health department will maintain an electronic database for the purpose of submitting reports of monitoring and maintenance activities, pumping, as well as limited repair measures.
- D. The health department will maintain and distribute an electronic minimum standard report form to be completed by the OSS contractor upon servicing, monitoring and maintaining, pumping, or providing limited repair measures of an OSS. This report will be given to the property owner upon completion of work and an electronic copy forwarded to the health department no later than 30 days from the date of service. A limited exception to this requirement is provided for discovery of OSS failure which must be reported to the health department within 24 hours of discovery, or by the end of the next business day, whichever is later. The contents of this report will include, but not necessarily be limited to:
 1. Location of property.
 2. Date of service
 3. Property tax number of property.
 4. Owner of property.
 5. Written description of any observed discharge, sewage, or effluent to the surface of the ground or surface waters.
 6. Septage disposal location, if applicable.
 7. Summary of work performed:
 - a. Monitoring and maintenance inspection report requirements:
 - (i). Monitoring and maintenance specialists must report:
 - (A). A complete and thorough evaluation of each system component.
 - (B). Any adjustments or calibrations performed on the system and related components.
 - (C). Limited repair measures as defined under this chapter.

- (D). Replacement or repair of proprietary system components.
- (ii). Pumpers must report:
- (A). A complete and thorough evaluation of each system component.
- (B) Limited repair measures as defined under this chapter.
- b. Limited repair report requirements:
- (i). Monitoring and maintenance specialists and installers must report:
- (A). Any adjustments or calibrations performed on the system and related components such as changes to timer and dose settings.
- (B). A list of system components that are replaced or added including the name of the manufacturer and model number.
- (C). A list of components that were repaired along with an accurate description of the work performed.
- (ii). Pumpers must report:
- (A). Pump make and model;
- (B). Dose setting; and
- (C). A list of components that were repaired along with an accurate description of the work performed.
- c. Pumping report requirements:
- (i). Gallons pumped.
- (ii). Condition of tank, lids, risers, baffles, and effluent screens.
- (iii). Recording of ponding levels in monitoring ports.
- (iv). Depth in inches of floating scum mat and sludge layer.
- (v). Description of any other services performed.
8. Name and certificate number of person performing the work.
9. Signature and date.
- E. Reports must be accompanied by the appropriate fee as determined by the current fee schedule, as set forth in chapter 1.40 SCBHC.

5.55.110 Installation requirements.

Certified installers are required to construct all OSS, except as otherwise allowed under SCBHC 5.55.120. In all cases, construction of the OSS shall include system back fill and final grading.

The installer shall:

- A. Follow the approved design. Design revisions must have the concurrence of the designer and the health department before commencing work.
- B. Have the approved design and permit in possession during installation.
- C. Be on the site at all times during the construction of the on-site sewage system.
- D. Install the on-site sewage system to be watertight, except for the disposal component.

- 1 E. Upon completion, post the permit on site in a conspicuous location until such time as
2 the health officer has granted final approval.
3 F. Cover the installation only after the health officer has given approval to cover.
4 G. Back fill and grade the site to prevent surface water from accumulating over any
5 component of the on-site sewage system.
6

7 **5.55.120 Health officer approval required for owner installations.**
8

9 The health officer may allow the owner of a single-family residence to install the OSS for
10 the owner's single-family residence that the owner intends to occupy provided the
11 following conditions are met:

- 12 A. The OSS is a conventional gravity system.
13 B. The property owner is in possession of a valid, approved design and permit for a
14 gravity OSS with no pump or siphon required.
15 C. The installation shall follow the approved design and meet the requirements of this
16 chapter, except for the professional installer certificate of competency requirements.
17 D. A certified installer performs all installation work not undertaken and completed by
18 the resident owner.
19

20 Under no circumstances shall a property owner perform more than one installation of an
21 OSS in a calendar year.
22

23 **5.55.130 Owner's responsibility.**
24

25 The owner of each operating OSS is responsible for ensuring that the system is
26 monitored and maintained, in accordance with the requirements of chapter 246-272A
27 WAC, the applicable Washington State Department of Health's guidance document
28 titled Department Standards and Guidance for Performance, Application, Design, and
29 Operation and Maintenance, and the rules and regulations contained within this chapter.
30
31

32 Section 3. Severability. If any provision of this ordinance or its application to any
33 person or circumstance is held invalid, the remainder of the ordinance or the application
34 of the provision to other persons or circumstances is not affected.
35
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43

PASSED this ____ day of _____, 2025.

SNOHOMISH COUNTY BOARD OF HEALTH
Snohomish County, Washington

Chairperson

ATTEST:

Clerk of the Board

() APPROVED
() EMERGENCY
() VETOED

DATE: _____

Approved as to form only:

Deputy Prosecuting Attorney

Community Navigator program presentation (SR 25-021; Cristina Ciupitu-Plath)

Division:

Prevention Services / Cristina Ciupitu-Plath, Healthy Communities Specialist

Background

The Snohomish County Health Department (SCHD) launched a Community Navigator Pilot Program (Jan–June 2025) to strengthen engagement with communities disproportionately impacted by COVID-19 and/or who speak underrepresented languages. The program partnered with 12 community-based organizations (CBOs) serving diverse groups—including Hispanic/Latinx, West African, Pacific Islander, Eastern European, Korean American, girls of color, youth, and rural populations.

Each CBO recruited and managed community navigators (55 total), who were compensated for up to 60 hours/month to deliver culturally relevant health outreach and education. CBOs were given flexibility to tailor outreach to community needs and held at least two events during the pilot. Navigators conducted individual consultations, hosted large-scale events (up to 1,500 attendees), and shared SCHD materials translated and adapted for cultural relevance.

SCHD supported the program through monthly CBO leader meetings, navigator workshops, and optional public health trainings. Priority health topics included mental health, substance use, chronic disease, and emergency preparedness. A cross-disciplinary SCHD team provided coordination, technical assistance, and guidance.

A built-in evaluation assessed program impact, with tools co-designed by community partners to respect privacy and usability. Initial findings show strengthened trust between SCHD and historically underserved communities, increased culturally responsive outreach, and enhanced language access. Many CBOs integrated new health content into their existing programs.

Challenges included varied organizational capacity for data reporting and a decline in survey participation over time. Despite this, the pilot successfully demonstrated that community-informed, flexible partnerships can improve public health engagement. Lessons learned will inform the next phase of the navigator model, with plans to embed it more deeply into SCHD's equity strategy.

Board Authority

RCW 70.05.060 - Powers and duties of local board of health

Recommended Motion

No motion required. Briefing only.

ATTACHMENTS:

Description

- Community Navigator Program Presentation



SCHD Community Navigator Pilot Program

Aug 12, 2025

Outline



- Vision

- Timeline

- Implementation

- Evaluation

Our Vision For The Community Navigator Program

To partner with organizations that can serve as **cultural bridges between their communities and public health**, serving as public health ambassadors and having **reach** in Snohomish County.

Why Community Navigators

Community navigators are crucial in ensuring that public health programs are inclusive, accessible, and culturally sensitive, making them a key asset in improving health outcomes in diverse communities.



Our Program

Focus

- Communities disproportionately impacted by COVID-19
- Communities speaking underrepresented languages

Community navigators were compensated on an hourly basis (\$50/hour for a maximum of 60h/month) to:

- Convene community and provide public health education
- Distribute culturally appropriate public health information to their communities
- Help community members access preventative services
- Support health data/information collection
- Support community outreach

Partner organizations were funding subrecipients, NOT contractors

Program Timeline

Nov '24:
Information
session

Dec '24 – Feb
'25: Contracting

Dec '24:
Application
review and
selection

Feb '25 – Jun
'25:
Implementation

Partner organizations



Center for Human Services

Building a stronger community...one family at a time



한인생활상담소

Korean Community Service Center



North
Counties'
Family
Services



WASHINGTON
WEST AFRICAN
CENTER

Partnership Goals



- Host opportunities for collaborative learning and trainings
- Co-create health promotion resources tailored to community needs
- Provide technical support and assistance as needed
- Allow opportunities for public health to be culturally responsive to community needs

Collaborative Learning and Training

Monthly workshops (Feb-May)

- Mental health
- Substance use
- Chronic disease
- Emergency preparedness

Optional (SCHD)

- Health literacy
- Suicide prevention
- Firearm safe storage
- Lead poisoning prevention
- Dementia
- Heart disease
- Child dental health
- Food safety/ permitting

Optional (Community)

- Understanding Native Hawaiian and Pacific Islander communities
- Best practices in working with Ukrainian families
- Best practices in TB prevention in Ukrainian communities

Optional Workshop Series

Digital Storytelling

- 1hr weekly meetings for 6 weeks
- Self-reflection
- Creative writing
- Voice recording
- Pictures, video, and sound selection
- Basic video editing via Canva

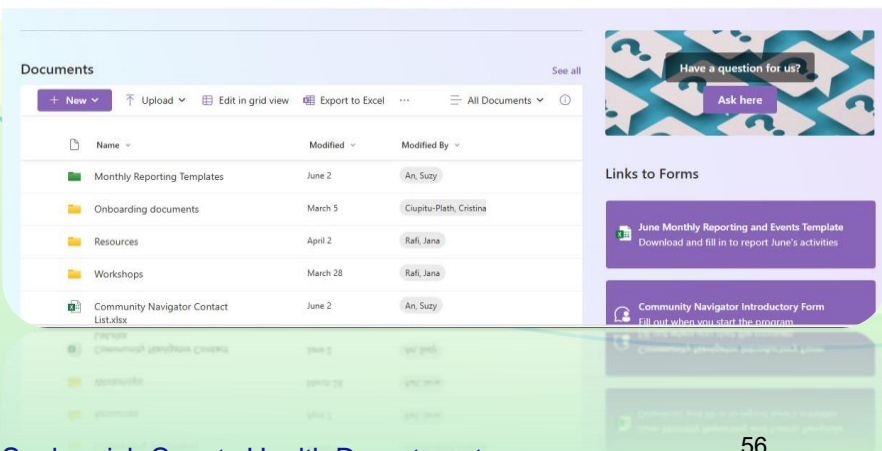
Peer Mental Health Navigator

- 5-week comprehensive, intersectional training
- Online, self-paced
- Live weekly sessions



Technical Assistance

- Monthly 1:1 partner program meetings with SCHD staff (virtual):
 - inform SCHD staff of current community engagement activities and high-level public health concerns facing the Community Navigator's community
 - discuss work plan for the month
- Reporting and invoicing support provided on request



Co-Creating Health Resources



Development of print and multimedia campaigns (e.g., diabetes prevention campaign)



Co-organizing community outreach events



Review and adaptation of existing health education materials



HOW TO PREVENT DIABETES

- 1. Stay active: walk or exercise 30 mins daily.
 - 2. Know your risk factors: age, weight, family history.
 - 3. Celebrate small healthy choices—they add up.
 - 4. Plan meals and involve family for support.
 - 5. Sleep 8–9 hours per night.
 - 6. Manage stress with joyful activities.
 - 7. Visit a doctor regularly and monitor blood sugar.
-
- Diabetes is a serious concern in our community.
 - Returning to traditional, wholesome food and active living can help protect our families.
 - Let's honor our roots and build a healthier future together.

info@wawac.org | www.wawac.org

Reminder diabetes is one of the chronic diseases affecting Africans in Snohomish county.

Many of our elders lived long and strong because they ate real food from the earth and moved their bodies every day. We can do the same, by choosing healthier meals and staying active, we protect ourselves, our families, and our community from diabetes and other chronic diseases.

Let's return to healthy traditions, and build a stronger future.



WASHINGTON
WEST AFRICAN
CENTER

SAY NO TO DIABETES

WITH BETTER EATING HABITS

For more info visit

info@wawac.org
www.wawac.org



Contact the Washington West African Center

425-758-3269

Snohomish County Health Department
www.snohd.org

Responsive Public Health

- Collecting data on community needs
 - Chronic disease
 - Safe environments (e.g., urban design, safe firearm storage)
- Offering workshops and training aligned with community needs
- Connecting partner organizations with SCHD teams to address needs



Evaluation



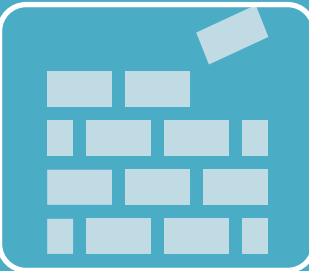
To what extent are the community navigator program activities being implemented as planned?

- What are the facilitators and barriers to implementing these activities?



Is the community navigator program effectively engaging and reaching its intended audience of historically excluded communities in Snohomish County?

- What are the facilitators and barriers engaging its intended audience?



To what extent are the program resources, inputs, and activities sufficient for successful implementation?

The program in numbers

- 12 partner organizations
- 64 community navigators
- 30 learning sessions
- ~ 1200 outreach activities/month, reaching up to 50,000+ people
- 69% outreach activities required interpretation/translation
 - Mostly needed in sharing information via chat groups and social media



**Up to 1500
community
members reached
at one event**

Workshop and training evaluation

- Community navigators provided feedback on 12 workshops (N=161 responses)
- Of the 161 responses, **96% of responses indicated they were “Very Satisfied” (75%) or “Satisfied” (21%)** with the workshops.
- **99% of responses indicated that navigators would apply and/or share learnings from the workshops** to their communities.
- 35% of responses indicated that they received resources (either physical or virtual).

"I am so excited to be a Community Navigator after all the training now I can carry on, on all these training and connecting and sharing with my Community."

Community navigator feedback

"My favorite moment from the Community Navigator Pilot Program was seeing the meaningful change and collaboration between SCHD and our local organizations. Having done this kind of work for many years, it has been a true blessing to witness this level of partnership and shared commitment. The collaboration has been fruitful, and I deeply appreciate the respect and recognition shown for our community's efforts and the dedication of the entire team."

"My favorite and exciting moment was when they explained to me what Community Navigator was and everything we were going to learn"

"My favorite moment was engaging with community members at health outreach events and seeing their appreciation for information delivered in their native language. It reminded me why community-based public health work is so important."

Community navigator feedback

"My favorite moment is learning and gaining all the training and attending workshops. Also connecting and creating relationships with the SCHD staff and seeing other community navigators from other communities. It shows we are all here for our community health equity."

"My favorite moment was seeing community members feel genuinely understood and supported after receiving materials in their native language for the first time."

"It was great to know that there's somewhere we can rely on."

"Watching each participant present their six-week video project during the last session of the digital storytelling training was truly emotional and inspiring."

Next steps

- Continue monthly workshop series to create networking and learning opportunities
- Continue responding to community needs
- Finalize evaluation and create a report for dissemination
- Leverage funding to continue partnership using
 - a deliverable-based model
 - quarterly and ad-hoc meetings between SCHD staff and community partners
 - continued evaluation



Thank You!

Name	Role	Area of responsibility	Email address
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Questions?

PUBLIC HEALTH
always working for a safer & healthier
SNOHOMISH COUNTY

Immunizations and vaccination panel (SR 25-022; James Lewis)

Division:

Office of the Director / James Lewis, Health Officer

Background

The Snohomish County Health Department's foundational mission is to protect and improve the health of our community. Central to this mission, and to global public health, is the profound impact of vaccination.

Vaccines represent one of the greatest public health achievements in history. They are a cornerstone of disease prevention, offering unparalleled benefits at both the individual and community levels:

- **Individual Protection:** Vaccines safely and effectively prepare our immune systems to fight off infectious diseases, significantly reducing the risk of severe illness, hospitalization, long-term complications, and death from a multitude of pathogens.
- **Community Immunity (Herd Protection):** High vaccination rates create a protective shield for the entire community, especially safeguarding those who cannot be vaccinated (e.g., infants, the immunocompromised, or individuals with certain medical conditions). This "herd immunity" prevents widespread outbreaks.
- **Eradication and Control of Diseases:** Historically, vaccines have led to the eradication of smallpox and brought diseases like polio and measles to the brink of elimination in many parts of the world, transforming global health landscapes.
- **Economic and Societal Benefits:** Beyond health, vaccines reduce healthcare burdens, prevent lost productivity due to illness, and allow communities to thrive without the constant threat of epidemics.
- **Vaccines are Proven to be Safe:** There are many rumors and discredited studies that are often referred to in the media claiming harms related to vaccines. These rumors significantly impact vaccine uptake and result in significant burden to health care providers in addition to making our communities less safe by negatively impacting vaccine uptake.

In today's complex information environment, it is more crucial than ever that we stand firmly on the side of evidence-based public health practices. Vaccines are rigorously tested, continuously monitored for safety and efficacy, and remain the most effective strategy for preventing a wide array of infectious diseases.

To further support our commitment to public health and provide the most current, accurate information, as well as illustrate the widespread support among our local healthcare community for vaccines, we have arranged an expert panel with discussions focusing on the science, safety, and societal benefits of vaccinations as well as the harms that can befall individuals and communities when vaccine uptake falls.

This panel includes a distinguished group of professionals, including:

Dr. John Dunn: Medical Director of Preventive Care Kaiser Permanente Washington; Member

WA Vaccine Advisory Committee: Discussing concerns about the current changes to COVID vaccine recommendations via CDC/FDA and restructuring of ACIP as well as other concerning trends.

Dr. Cornelius Van Niel: Clinical Director of Pediatrics at SeaMar Community Health Centers: Discussing vaccine promotion in the clinical setting

Dr. Catherine Yee: Medical Director Western Washington Medical Group: Discussing impact of immunizations on Health and the declining immunization coverage in WA and nationwide

Dr. Jay Cook: Former Chief Medical Officer Providence Regional Medical Center – Everett: Discussing likely impacts to health and the healthcare system if immunization rates continue to decline

Dr. James Lewis: Health Officer of Snohomish County: Moderator

Ms. Chelsea Charles: Granite Falls resident and advocate for vaccinations: Discussing her lived experience with vaccine preventable disease as a parent.

This panel will provide clear, evidence-based information and insights based on lived experience and aims to:

- Demystify vaccine science and address common misconceptions.
- Highlight the latest research and data on vaccine safety and effectiveness.
- Discuss the ongoing impact of vaccination on population health and disease control.
- Offer an opportunity for Board of Health members to engage directly with leading authorities on this critical subject.

Board Authority

RCW 70.05.060 – Powers and duties of local board of health

Recommended Motion

No motion required. Briefing only.



Upcoming meetings

Background

All regular meetings occur on the 2nd Tuesday of the month at 3:00 p.m. The next three upcoming meetings are:

September 9, 2025

October 14, 2025

November 11, 2025