



SOUTH CENTRAL HEALTH DISTRICT

196 North Main St.
Southington, CT 06489
860.276.6275 | schd-ct.org

APPLICATION FOR ABANDONMENT OF SSDS

Fee **\$50.00**

Application Date _____ Abandonment Date _____

Address _____ Town _____

Property Owner

Name _____

Address _____ Town _____

Phone _____ Email _____

Contractor

Name _____

Address _____ Town _____

Phone _____ Email _____

Components for abandonment: (check all that apply)

☐ Septic Tank ☐ Hollow Leaching Structures (galleries/drywell) ☐ Cesspool

Components/structures emptied (pumped) by a cleaner licensed pursuant to CGS Chapter 393a?

☐ Yes
☐ No If yes, date pumped _____ Pumper _____

Technical Standards for Subsurface Sewage Disposal Systems, Revised January 1, 2024, II F. System Abandonment: Abandonment of any hollow SSDS component (e.g., septic tank, pump chamber, leaching chamber) or cesspool shall be performed in a manner to eliminate the danger of inadvertent collapse. It is the property owner's responsibility to make arrangement for abandonment of any hollow SSDS component or cesspool. Structures shall be filled with sand gravel, or other DOH approved material (e.g., concrete), crushed in place, or removed from the site for disposal as approved by the DOH. The DOH may authorize a former system component (except steel tanks, or cesspools) in compliance with Table 1 to be utilized for another purpose (e.g., water treatment wastewater dispersal system) rather than be formally abandoned if the property owner demonstrates the component is in acceptable condition and such use will not cause a health hazard or nuisance condition. Structures left in place shall be located on a plot plan and noted in the property file.

Property Owner/Authorized Agent (sign & print)

Date

Date Inspected _____
FOR DISTRICT USE ONLY
Abandonment Inspected by _____

Notes: _____

Date _____
Total fees paid \$ _____
☐ Cash
☐ Check
☐ Money Order # _____ Fee Code(s) _____