

# OLDHAM COUNTY SEWER DISTRICT

## APPLICATION FOR REVIEW OF CONSTRUCTION DOCUMENTS FOR WASTEWATER FACILITIES

(Construction, Modification, Replacement of Devices Used to Collect, Pump, Transport or Treat Wastewater)

**Project:** \_\_\_\_\_  
Name Location

**Description:** \_\_\_\_\_

**Owner:** \_\_\_\_\_  
Name Address

Owner's Signature Date Telephone No.

### CHECKLIST FOR SUBMITTAL DOCUMENTS

**Applicant to check each item that applies:**

1. \_\_\_\_\_ Three sets of engineering design reports and/or detailed plans and specifications.
2. \_\_\_\_\_ Design complies with "Recommended Standards for Sewage Works", 1978, latest revision.
3. \_\_\_\_\_ Plans were prepared, stamped, signed and dated by a professional engineer registered in Kentucky.
4. \_\_\_\_\_ U.S.G.S. map showing Project location and boundary or service area as applicable.
5. \_\_\_\_\_ Plans are accompanied by design engineering calculations and flow information including pump performance curves.
6. \_\_\_\_\_ Professional engineer will perform inspections to certify that facilities were constructed in accordance with approved plans.

**Design Engineer:** \_\_\_\_\_  
Name Registration No.

Telephone No.

Address

#### Application Fee To Be Paid

#### Circle Amount Due

- |  |         |
|--|---------|
| <input type="checkbox"/> Sewer Line (less than 3,000 feet)   | \$ 510  |
| <input type="checkbox"/> Grinder Pump Station, Force Main and/or Sewer Line (3,000 - 6,000 feet)                           | \$ 765  |
| <input type="checkbox"/> Pump Stations (less than 250 GPM), Force Main and Sewer Line (6,000 - 12,000 feet)                | \$1,275 |
| <input type="checkbox"/> Pump Stations (greater than 250 GPM), Force Mains and/or Sewer Lines (greater than 12,000 feet).  | \$2,040 |
| <input type="checkbox"/> Planning Information, Documents Plans and Reports for Wastewater Treatment Facilities and Systems | \$2,250 |

**Note: Fee is nonrefundable. Make check payable to: "Oldham County Sewer District." Incomplete submittals will be returned with no review.**

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**For OCSD Use Only**

Date Plans Received: \_\_\_\_\_ WWTP: \_\_\_\_\_

No. Received \_\_\_\_\_ Plans \_\_\_\_\_ Specifications \_\_\_\_\_

Other Material: \_\_\_\_\_

Reviewing Engineer: \_\_\_\_\_ Date Payment Received: \_\_\_\_\_

Comments: \_\_\_\_\_ Amount Received: \_\_\_\_\_

Received By: \_\_\_\_\_

700 West Jefferson Street  
LaGrange, Kentucky 40031

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