Santa Barbara County PUBLIC Health DEPARTMENT

Environmental Health Services

225 Camino Del Remedio, Santa Barbara, CA. 93110 ◆ (805) 681-4900
2125 S. Centerpointe Pkwy., #333 ◆ Santa Maria, CA 93455-1340 ◆ (805) 346-8460

Application for a Permit to Construct State Small Domestic Water System [4618]

Office Use Only
SR #: _____
AR #: _____

PLAN CHECK FEES/SERVICES

Application Fee (non-refundable)..... $255

Plan Review and Inspection Fees..... $161 per hour; will be billed monthly

(Plan review fees include plan review and inspection services. Please read the EHS policy on Plan Review Fees CAREFULLY before completing this application: http://www.countyofsb.org/uploadedFiles/phd/PROGRAMS/EHS/10-10%20Plan%20Review%20Billing%20Information%20Sheet.pdf)

Billing Information *(This section **MUST** be completed. Incomplete information will result in project delays.)*

Name: Last _____ First _____

Care of: _____

Billing Address: _____ Suite/Apt/Unit: _____

City: _____ State: _____ Zip: _____

Phone: (____) _____ Cell: (____) _____ Email:_____

Applicant Name: _____ **Project Location:** _____

Assessor Parcel #'s:_____

_____

_____

Permit Type: ☐ New Construction ☐ Modification/Amendment of Existing Permit

Land Use Case (s) #: _____ Describe: _____

_____

Water Source: ☐ Wells ☐ Horizontal Well (s)
☐ Springs ☐ Creek/Stream
☐ Other Public (specify) ☐ Other Private (specify)

Well Data: ☐ On Site ☐ Date Drilled: _____ Permit #: _____
☐ Off Site ☐ Assessor #: _____ Permit #: _____

Source Yield Tests
(Completed in last 5 yrs):
Test Date: _____

Chemical Analysis
(Completed in last 3 yrs):
Test Date: _____ Treatment Required: ☐ YES ☐ NO

Please Attach the Following:

- ☐ Copy of Grant Deed
- ☐ Well Driller's Log
- ☐ Source Yield Report with Geologist Evaluation
- ☐ Engineered Plans and Specifications Date:_____
- ☐ Copy of Organized Association (SSWS Only)
- ☐ Easement/Water Rights
- ☐ Chemical Analysis
- ☐ Treatment Form with Specifications
- ☐ Engineered Calculations Date:_____

Additional permits other than those from Environmental Health Services may be required prior to the installation of the water system. Please contact Planning and Development at (805) 568-2000 or (805) 934-6250 for more information.

I hereby attest that the above information and attached data are true and complete to the best of my knowledge. I agree to comply with all the rules and regulations of Environmental Health Services pursuant to Santa Barbara County Ordinance #4181.

Applicant's Signature: _____Mailing Address: _____

Project Engineer's Signature: _____Mailing Address: _____

In cases where the construction of a multiple parcel water system, the modification of an existing system or the amendment of an existing permit involves two or more property owners, all property owners must sign this application.

We hereby attest that all attached information and data are true and complete to the best of our knowledge. We agree to comply with all rules and regulations of Environmental Health Services pursuant to Santa Barbara County Ordinance 4181.

Applicant's Signature:_____Date: _____

Applicant's Signature:_____Date: _____

Applicant's Signature:_____Date: _____

Applicant's Signature:_____Date: _____

FOR DEPARTMENT USE ONLY

Application Fee: Rec'd By: _____ Date Rec'd: _____ Amount Rec'd: $ _____

❑ Check ❑ CC ❑ Cash ❑ Other Check Date: _____ Chk/CC #: _____ Receipt No: _____

Complete Application Accepted by: _____

Permit Conditions

☐ **1.** Obtain necessary electrical, structural and plumbing permits from the appropriate Public Works agency.

☐ **2**. Obtain necessary land use clearance from the Planning & Development Department.

Prior to Occupancy of Any New Dwelling and/or Commercial Building:

☐ **1**. Construct the Domestic Water System in accordance with the EHS approved permit application and plans. Any changes to the plans must be approved by EHS prior to construction. As-built plans must reflect any construction changes.

☐ **2**. Project engineer must supervise the construction and certify in writing that the system was constructed in accordance with the approved plans and can be expected to function properly.

☐ **3.** For water sources that do not meet State drinking water standards, submit a copy of a treated water chemical analysis from a State certified laboratory.

☐ **4.** Properly disinfect and flush the completed water system.

☐ **5**. Satisfactory bacteriological samples must be obtained.

☐ **6**. Environmental Health Services shall conduct a final inspection.

☐ **7.** As needed, install and have tested by a certified tester, County approved backflow prevention device(s). Submit satisfactory test reports to EHS.

☐ **8**. Submit recorded copy of Easement/Water rights documentation.

☐ **9**. Other: _____

When approved by the Environmental Health Officer/Specialist, this application shall be considered a Permit to construct a Domestic Water System. The permit is valid for 3 years from the date of issuance. This permit is not transferable unless the new property owners apply and qualify for the transfer of the permit.

Application Disposition: ☐ Approved ☐ Denied

Environmental Health Officer/Specialist: _____ Date: _____

Attachment A

Notice to be Recorded for
Primary Standard Exceedance

The water for this property APN(s): _____
_____ is supplied by a private well and water system that was approved by Santa Barbara County Environmental Health Services (Permit #_____). Laboratory analysis indicates that the water exceeds the maximum contaminant level(s) for _____, (a primary drinking water standard) as set by the State of California. Drinking water that exceeds maximum contaminant levels for primary standards may have negative health impacts. Consequently, the water must be treated to in order to protect the health and safety of the consumer.

The water system was approved based upon the installation and maintenance of a water treatment system designed to remove _____. The maintenance and efficacy of the treatment equipment is the responsibility of the water system owner or owners."

Attachment B

Notice to be Recorded for
Secondary Standard Exceedance

BUYER BEWARE DISCLOSURE FOR: Lot _____ of Tract No. _____: EXCEEDENCE OF MAXIMUM CONTAMINANT LEVEL STANDARDS FOR DRINKING WATER.

Title 22 of the California Code of Regulations establishes chemical, mineral and physical standards for drinking water. These standards are divided into two categories; primary standards which are associated with potential health effects and secondary standards which may affect the consumer's acceptance of the water but do not pose a health risk. Section 64449 of Title 22 establishes the maximum contaminant levels for specified minerals and physical qualities of drinking water. An analysis from _____, a state certified environmental laboratory, dated _____ indicates that the water provided to this parcel for human consumption exceeds the established standards for _____. While not representing a health risk, the elevated concentration(s) of this/these mineral(s) and/or the physical nature of the water may affect the taste, odor and/or appearance of the water. In addition, the water in its natural state may stain various household plumbing fixtures.

Attachment C

TO: Santa Barbara County Public Health Department
Environmental Health Services

Date: _____

SUBJECT: Water Treatment Letter

(*To be completed by the company providing treatment equipment*)

We have reviewed the chemical analysis by _____

laboratory _____ (City/State), Test Number _____

Report dated _____. To reduce the problem with _____

_____
(List deficiency)

Treatment will be by _____

Using _____

_____

Equipment, which will render the water as potable in compliance with State Health Department standards

_____ _____ _____
(Print Name) (Signature) (Date)

_____ _____
(Firm Name) (Firm Address)

(To be completed by the owner)

The water source is a _____ located on Assessor's Parcel Number _____. I am the sole or part owner of the water source or their authorized agent and wish to construct _____ on Assessor Parcel Number _____. Further, this is a firm commitment to procure the above described equipment for this project

_____ _____ _____
(Print Name) (Signature) (Date)

_____ _____
(Address) (Telephone)

STATE SMALL WATER SYSTEM APPLICATION INSTRUCTIONS

The following instructions have been developed to assist the applicant for a State Small Water System Permit in filling out the application and providing the attachments required to comply with the applicable provisions of the Santa Barbara County Water Systems Ordinance. These instructions have been numbered to coincide with the numbering of items on the Permit Application. Please review these instructions carefully, as they will guide you in providing the information in sufficient detail to allow the review of your Permit Application in as expeditious a manner as possible.

1. **Project Applicant and Location**: Please type or print the applicant's name and project location address.
2. **Service Connections**: Indicate the total number of proposed service connections.
3. **Assessor Parcel Numbers**: List the parcel numbers of those to be part of the water system.
4. **Permit Type**: Indicate whether this project will be New Construction or a Modification of Existing Permit.
5. **Land Use Case**: Number of Case, and Describe the project.
6. **Water Source(s):** Check the appropriate box for the type of water source to be used for project.
7. **Well Data**: Indicate whether the source is onsite or offsite of any of the parcels involved. Provide the date the well was completed and the Assessor Parcel Number where it is located.
8. **Source Yield Test**: A water well source or combination of sources must be able capable of providing a minimum of 3 gallons per minute per service connection. (Please attach the yield determination/pump test to the application.) The yield determination/pump test is valid for 5 years from the date of the test.

   The test pumping of a well must be at a constant rate and continuous for the period of time specified below with drawdown readings taken and recorded at a minimum once per hour:

Minimum Flow Rate (gpm)	Test Duration (hrs.)
3 - 10	72
>10 - 50	24
>50	12/4*

*In lieu of the 12-hour yield test, a shorter yield test may be performed for sources that produce in excess of 50 gpm if an analysis of the source yield report is provided by a California-Professional Geologist, Certified Hydrogeologist or Certified Engineering Geologist. This analysis shall include a geohydrologic evaluation of the underground water formation or basin and a finding that the production rate is characteristic of that formation or basin and can be reasonably expected to continue for the foreseeable future with the projected water system demand and use. All other pump test requirements shall apply and the duration of a yield test for a high production source shall not be less than four hours.

Water well source(s) for a State Small Water System must be test pumped under the direction of a California registered geologist, a certified engineering geologist, a registered civil engineer, a licensed well drilling contractor (C-57) or a licensed pump contractor (C-61).

Upon completion of the test pumping, a report, signed by the person(s) conducting the test, must be submitted which shows hourly readings of flow rate and hourly readings of drawdown. The water level in the well during the last 4 hours of test pumping may not vary more than 1 foot. If the drawdown is greater than 1 foot during the last 4 hours of test pumping, a California registered geologist or a certified engineering geologist shall determine long-term drawdown and reliability (using accepted engineering well yield formulas and/or time recovery data) and determine if the well can be expected to be a reliable, long-term source of water. The pump test is valid for 5 years from the date of test pumping. All applicants, particularly when the water source is of low yield, are encouraged to consult with qualified engineers or geologists concerning the long-term reliability of water sources.

An analysis of the source yield test results by a California professional geologist or a certified engineering geologist shall accompany the source yield report. This analysis shall incorporate a geohydrologic evaluation of the underground water formation or basin and a certification that water resources are available in sufficient quantity and on a long-term basis to adequately supply the proposed system and meet the minimum requirements of Santa Barbara County Code 34B.

9. **Water Quality Chemical Analysis**: Following completion of the source yield testing, a water sample must be collected by an approved sampler (a licensed well driller, pump contractor, certified water treatment operator, technician from a State-accredited laboratory, Registered Civil Engineer, California Professional Geologist or Certified Engineering Geologist) **for chemical analysis by a State-accredited water testing laboratory.** Special bottles for collecting the water sample(s) are available from the testing laboratories. Questions regarding sampling procedure can be directed to EHS. Please attach the test results to the application. The chemical analysis of a water sample, collected from the source by an approved sampler, will be valid for 3 years.

Local, State approved testing facilities are available at the following laboratories:

Abalone Coast Analytical
141 Suburban Road, Suite C-5
San Luis Obispo, CA 93401
(805) 545-9838

CAPCO Analytical Services Inc.
1536 Eastman Avenue, Suite B
Ventura, CA 93003
(805) 644-1095

Clinical Lab of San Bernardino
516 – North 8th Street, Suite A
Lompoc, CA 93436
(805) 737-7300

FGL Environmental
853 Corporation Street
Santa Paula, CA 93050
(805) 659-0910

Midway Laboratory
315 Main Street
Taft, CA 93268
(805) 765-2364

Oilfield Environmental & Compliance Inc.
307 Roemer Way
Santa Maria, CA 93454
(805) 922-4772

PLEASE NOTE: This is **not** an endorsement of the companies listed, and the above list is current as of October 2021. Names and addresses of other approved testing laboratories throughout the State are available at https://waterboards.maps.arcgis.com/apps/webappviewer/index.html?id=bd0bd8b42b1944058244337bd2a4ebfa, please insure the lab is certified for Toxic Chemical Elements of Drinking Water and 27Inorganic Chemistry of Drinking Water testing.

Water quality chemical analyses must be performed for Primary and Secondary Drinking Water Standards: Maximum contaminant levels, as excerpted from California Domestic Water Quality Monitoring Regulations (Chapter 15 of Title 22 of the California Code of Regulations), are as follows:

PRIMARY STANDARDS Constituent	Maximum Contaminate Level (mg/l)	SECONDARY STANDARDS Constituent	Maximum Contaminant Level (mg/l)
Aluminum	1.00	Aluminum	0.2
Antimony	0.006	Chloride	500.00
Arsenic	0.010	Color	15 Units
Barium	1.00	Copper	1.00
Beryllium	0.004	Corrosivity	Non Corrosive
Cadmium	0.005	Foaming Agents (MBAS)	0.50
Chromium	.05	Iron	0.30
Cyanide (Analysis is not required)	0.15	Manganese	0.05
Fluoride (Level varies with temperature)	2.00	Odor - Threshold	3 Units
Mercury	0.002	pH	8.5 Units
Nickel	0.10	Silver	0.1
Nitrate (as N)	10.00	Sulfate	500.00
Nitrite (as N)	1.00	Specific Conductance	1,600 Micromhos
Selenium	0.05	- - - - - - - - or - - - - - - - Total Dissolved Solids	- - - - - or - - - - - 1000.00
Thallium	0.002	Turbidity	5 Units
		Zinc	5.00

If the allowable levels of any of the above listed as Primary Contaminants are exceeded, the applicant shall install centralized treatment so that all stored domestic water meets all primary standards. The applicant shall also include a recorded notice to the Grant Deed that states that the water does not meet state established primary drinking water standards (**Attachment A**). The applicant shall submit a copy of the recorded notice with this division.

If the allowable levels of any of the above listed as Secondary Contaminants are exceeded, the applicant has two options.

Option 1	Install a water treatment unit to reduce those contaminants to less than the maximum contaminant levels.
Option 2	In lieu of treatment, the applicant shall record a "Buyer Beware" notice to the Grant Deed (**Attachment B**).

If treatment is provided, the box on the application indicating "Treatment Required" should be checked and all documentation regarding the type of treatment unit, make, model number, specifications and capacity shall be submitted for review. There are a number of companies in the area that specialize in the science of water treatment that can assist you in determining the type of treatment and equipment best suited for your needs. A treatment commitment is required that is signed by the property owner and by a representative of the treatment company (**Attachment C**).

Please note that aluminum has two maximum contaminant levels listed in the chart printed above. Consequently, if present in concentrations above 1.0 mg/l, it is a primary standard deficiency and will require centralized treatment. If aluminum is present in concentrations above 0.2 mg/l but less than 1.0 mg/l, then it is considered a secondary standard deficiency and point of entry treatment would be acceptable. Point of entry treatment is acceptable for secondary constituents.

10. **Treatment:** If required, Indicate water treatment units to be utilized.

11. **Notice To Be Recorded for Primary Standard Exceedance**: **Attachment A** shall be recorded if the water produced does not meet a Primary Drinking Water Standard.

12. **Notice to be Recorded for Secondary Standard Exceedance**: **Attachment B** may be recorded in lieu of treatment if the water produced does not meet a Secondary Drinking Water Standard.

13. **Water Storage**: Indicate the proposed size and material of the water storage facility. The Ordinance requires a minimum of 1,000 gallons per service connection.

14. **Repressurization**: Provide the make, model and capacity of all repressurization equipment. This includes the well pump and any booster pumps.

15. **Provide the following**:
    A. Proof of Ownership: Please attach a recorded copy of the Grant Deed.
    B. Well Drillers Log
    C. Source Yield Report with Geological Evaluation
    D. Engineered Plans and Specifications
    E. Easement/Water Rights
    F. Chemical Analysis
    G. Treatment Specifications if necessary
    H. Engineered Calculation

16. Provide the signatures of all owners participating in the water system

Note: This is an informational sheet only and not actively maintained; it is not an endorsement of those listed.

California Registered Civil Engineers

(Experienced in water system design)

Michael Avakian
820 Moreno Rd.
Santa Barbara, Ca 93103
805-569-1034

FUGRO West Inc.
4820 McGrath, Suite 100
Ventura, Ca 93003
805-650-7000

Penfield and Smith
101 E. Victoria St.
Santa Barbara, Ca 93101
805-963-9532

Stantec Consulting Services Inc.
200 E. Carillo St., Suite 101
Santa Barbara, Ca 93101
805-963-9532

Bethel Engineering
2624 Airpark Dr.
Santa Maria, Ca 93455
805-934-5767

MNS Engineering, Inc
4141 State St.
Santa Barbara, Ca
805-736-5523

MNS Engineering, Inc.
201 Industrial
Buellton, Ca
805-688-5200

Ashley & Vance Engineering, Inc.
210 E. Cota St.
Santa Barbara, Ca 93101
805-962-9966

Flowers & Associates
500 E. Montecito St.
Santa Barbara, Ca 93101
805-966-2224

William Sommermeyer
1173-D El Camino Real
Arroyo Grande, Ca 93420
805-489-5380

Water Resources Engineering
2300 Alessandro Dr., Suite 215
Ventura, Ca
805-653-7900

Coast Engineering & Survey, Inc.
1110 California Blvd, Suite B
San Luis Obispo, Ca 93401
805-440-3348

CALIFORNIA REGISTERED GEOLOGISTS

William Anikouchine
1636 Hillcrest Rd.
Santa Barbara, Ca
805-962-4234

Campbell Geo, Inc
Steve Campbell
327 E. Haley St.
Santa Barbara, CA 93101
805-965-5003

Katherman Explorations
Charlie Katherman
P.O. Box 181
Santa Maria, Ca
805-928-0223

Hoffman & Associates
Rick Hoffman
1149 Palomino Rd.
Santa Barbara, Ca
805-569-1911

Michael Hoover
P O Box 30860
Santa Barbara, Ca 93130
805-569-9670

Earth Systems Southern California
1731-A Walter Street
Ventura, Ca 93003
(805) 642-6727

Adam Simmons
Santa Barbara, Ca
805-682-3898

Fugro West, Inc
4820 McGrath St.
Ventura CA 93003
805-650-7000