



280 S DECATUR BLVD, LAS VEGAS, NV 89107  
(702) 759-0660 | [www.snhd.info](http://www.snhd.info)

### **CHANGE OF OWNERSHIP GUIDE FOR COMMERCIAL INDIVIDUAL SEWAGE DISPOSAL SYSTEMS (ISDS)**

Plan Review appointments cannot be made until the application is returned and payment is verified. The application can be submitted and payment made in one of the following ways:

- In Person at the Southern Nevada Health District (SNHD) office located at 280 S Decatur Blvd. Counter hours are from 8 AM - 3:30 PM, Monday through Friday, and the counter is closed for lunch between 12:30 PM - 1:30 PM. Please schedule an appointment before coming in to ensure that staff is available for processing. Acceptable methods of payment include company checks, cashier's checks, money orders, and cash. Visa and MasterCard are only accepted if your government ID matches EXACTLY what is on the card. **Personal checks are not accepted.**
- The application can be returned by email. The invoice will be forwarded and payment can be made online at <http://snhd.info/eh/payment>. All major credit cards are accepted. Payments made online can be verified after 12 PM the following day or the payment confirmation can be forwarded to SNHD staff.

Once we receive payment of the application fee, we will schedule a plan review appointment with you. Prior to your appointment, you will need to provide the **CHANGE OF OWNERSHIP REQUIREMENTS** as listed on Page 2 of this guide.

#### **Change of Ownership Fees:**

Application Fee	\$337.00
Reinspection or Additional Site Visit	\$275.00

The existing Individual Sewage Disposal System should have a permanent barricade in place to prevent vehicular access over the septic tank and leach field. The plan review staff will determine whether the existing barricade is compliant or modifications will need to be made. If the existing Individual Sewage Disposal System does not already have a permanent barricade in place to prevent vehicular access, it will be required and must be completed prior to the inspection.

At the time of the inspection, the septic tank lid needs to be removed for the inspection OR you may provide a pumping receipt dated within the last year showing the septic tank was pumped. If there are issues found during the inspection or you are not prepared as required above for the inspection, a re-inspection fee will be assessed for any additional site visit.

#### **NOTE:**

If there is any remodeling being done to the structures on your parcel, a change of ownership must be approved prior to any building department sign off.

**SOUTHERN NEVADA HEALTH DISTRICT**  
280 S DECATUR BLVD, LAS VEGAS, NV 89109

**CHANGE OF OWNERSHIP PLAN REVIEW REQUIREMENTS**

1. If remodeling, one set of building plans which shall include floor plans showing all plumbing fixtures (actual and proposed) which will connect to the septic system. This shall include the calculation sheet showing total fixture breakdown (actual and proposed) and the method of calculating the liquid capacity of the septic tank as per SNHD Regulations Governing Individual Sewage Disposal Systems, Section 2.3, and Tables II & III (page 31 & 33). If more than one method of calculation is possible, then each method must be made and submitted for review. The septic system will be designed for the larger of these calculations.
2. Legal description, Tax Assessor's parcel number and copy of deed for the property.
3. A Revised Plot and Grading Plan, **prepared and stamped by a registered engineer**, showing:
  - Lot lines, including dimensions
  - All structures, proposed, actual and temporary (with exception of construction shacks)
  - Driveway, parking lots and bumpers (if applicable)
  - Location of well and/or neighboring wells (if applicable)
  - Water lines, mains and fire hydrants
  - Watercourses, (wash, flood control channel, etc.)
  - Street name(s) and a directional arrow
  - Existing septic tank and leach field location, including leach field dimensions and leach lines
  - Distances from existing septic system to well, property line, structures, etc. Refer to Construction Inspection Report.
  - Barriers preventing vehicular traffic over the septic system.
4. Water:
  - a. If property is served by municipal water, a copy of the most recent water bill is required.
  - b. If property is served by commercial well, the permit number and Well Driller's Log is required. SNHD will check to ensure that the well is in good standing with the Nevada State Division of Water Resources.
5. If property has been divided by parcel map, a copy of the recorded parcel map is required.
6. A compliance inspection needs to be scheduled at the time the fee is paid. A \$275.00 re-inspection fee will be required if more than one inspection is required.
  - a) The two foot lid must be removed from the top of the septic tank prior to this inspection or a pump receipt dated within the past 12 months must be furnished.
  - b) The change of ownership will not be approved until all compliance issues are resolved.
7. *Additional information may be required and will be determined on an individual basis.*

**A PRE-DEVELOPMENT REVIEW IS AVAILABLE. CALL 759-0660 FOR AN APPOINTMENT.**

<b>TELEPHONE NUMBER:</b> 759-0660	<b>HOURS:</b> 8:00 A.M. - 3:30 P.M.	<b>FEE:</b> \$337.00
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**COMMERCIAL REQUIREMENTS FOR ISDS**  
**QUANTITY OF SEWAGE FLOW PER FIXTURE**

<u>Kind of Fixture:</u>	<u>Private Use</u>	<u>Public Use</u>
Bar Sink	1	2
Bathtubs (with or without shower over)	2	4
Bidets	2	2
Dental units or cuspidors	-	1
Drinking Fountains (each head)	1	2
Floor Drains	2	2
Interceptors for grease, oil, solids, etc.	3	3
Interceptors of Sand, Auto Wash, etc.	-	6
Laundry Tubs	1	2
Clothes Washers	2	4
Receptors (floor sinks) indirect waste receptors for refrigerators, coffee urns, water stations, etc.	1	1
Receptors indirect waste receptors for commercial sinks, dishwashers, airwashers	-	3
Showers (each head)	2	4
Sinks, commercial or industrial, schools, etc. (including dishwashers, wash-up sinks & wash fountains, 2" min. waste)	-	4
Sinks, flushing rim, clinic	-	10
Sinks, and/or dishwashers (residential, 2" min waste)	2	-
Sinks, Service	3	3
Trailer Park Traps (one for each trailer)	6	6
Urinals, pedestal	-	10
Urinals, stall	-	5
Urinals, wall (2" min waste)	-	5
Wash basins (lavatories) single	1	1
Wash basins, in sets	2	2
Water Closets (flush tanks)	4	5
Water Closets (flushometer valve)	6	10

Minimum Fixture Units Served	Minimum Liquid Capacity Tank in Gallons	Required Absorption Bottom Area for Seepage Beds or Sidewall Area for Seepage Pits and Trenches								
		350	400	450	635	775	1,100	1,345	1,550	
0-20	1,000	350	400	450	635	775	1,100	1,345	1,550	
21-25	1,200	420	480	540	760	935	1,315	1,610	1,860	
26-35	1,500	520	600	710	950	1,165	1,645	2,015	2,325	
36-45	2,000	700	800	900	1,272	1,550	2,200	2,690	3,100	
46-55	2,250	788	900	1,013	1,429	1,744	2,475	3,027	3,488	
56-60	2,500	875	1,000	1,125	1,588	1,940	2,750	3,363	3,875	
61-70	2,750	963	1,100	1,238	1,747	2,132	3,025	3,699	4,263	
71-80	3,000	1,050	1,200	1,350	1,905	2,325	3,300	4,035	4,650	
81-90	3,250	1,138	1,300	1,463	2,064	2,519	3,575	4,371		
91-100	3,500	1,225	1,400	1,575	2,223	2,713	3,850	4,708		
	Percolation Rate	3	4	5	10	15	30	45	60	

Fixture units over 100 - 25 gallons per fixture unit



8975 Hill Street, LAS VEGAS, NV 89103  
(702) 759-0660 | [www.snhd.info](http://www.snhd.info)

### COMMERCIAL ISDS CHANGE OF OWNERSHIP APPLICATION

OWNER INFORMATION (PERMIT HOLDER)			
Property Owner:			
Sole Proprietorship:	Partnership:	Corporation:	LLC:
Mailing Address:			
Phone:	Fax:	E-mail:	
PROPERTY INFORMATION (LOCATION OF ISDS)			
Property Address:			
APN:	Lot Size (ac):	Jurisdiction:	Zoning:
Water Supply:	Public Water:	Well Water:	
Well Information (PROVIDE A COPY OF THE WELL LOG OR WATER PERMIT IF PROPERTY IS ON A WELL)			
NV Division of Water Resources Well Log #:		NV Division of Water Resources Water Permit #:	
CHANGE OF OWNERSHIP REQUIREMENTS			
The property owner understands that the revised site plan / grading plan must be prepared by a <u>registered engineer licensed by the State of Nevada?</u>			Initials
The property owner understands that there needs to be an approved permanent barricade in place for the septic system prior to inspection.			Initials
ISDS INFORMATION			
			<u>YES</u> <u>NO</u>
Has the septic system pumped within the last year?			
Will the property be undergoing a remodel / tenant improvement?			
Will there be any plumbing changes during the remodel?			
Inspection Contact:			
Name:		Phone Number:	
AGREEMENT			
1. A plan review appointment must be made prior to submitting a change of ownership application. All fees must be paid prior to scheduling a field inspection or receiving Building Department sign off.			
2. If the inspector is NOT able to access the ISDS on the scheduled inspection date, a re-inspection fee of \$275 will be assessed for another site visit. An exact inspection time cannot be guaranteed however we will do our best to accommodate requests.			
3. Any compliance issues found as a result of the change of ownership inspection will need to be addressed prior to approval.			
4. I've read the attached document: <u>Change of Ownership Guide for Commercial Individual Sewage Disposal Systems</u>			
SIGNATURE		PRINT NAME	DATE

FOR OFFICE USE ONLY:

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