

**SOUTHERN NEVADA HEALTH DISTRICT**  
280 S DECATUR BLVD, LAS VEGAS, NV 89107

**TENANT IMPROVEMENT APPLICATION REQUIREMENTS**

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**\*\*\*\*\*PLEASE CALL 759-0660 PRIOR TO YOUR VISIT, TO COORDINATE AN APPOINTMENT.\*\*\*\*\***

1. One set of building plans for the addition.
2. Copy of *recorded* deed for property. (Available at the Clark County Recorder's Office)
3. **NEW** plot plan which must include: **MUST BE DRAWN TO SCALE** (ENGINEER OR ARCHITECT SCALE ONLY)
  - Lot lines, including dimensions
  - All structures (house, garage, storage shed, temporary trailer, pool, etc.) and future additions
  - All driveways
  - Location of well and/or neighboring wells, *if applicable*.
  - Water lines to existing structures and additions
  - Watercourses (wash, flood control channel, irrigation ditch, etc.) and Easements
  - Street name(s)
  - Directional arrow
  - Distance from septic system to house and additions, well, property line, water line, proposed swimming pool, pool equipment, trees, etc.
  - **Location of all existing septic tanks and leach fields (SEE SAMPLE PAGE PROVIDED) \***
4. Private well - Copy of Well Driller's Report. (Available at Nevada State Division of Water Resources)
5. Community well - Copy of Well Driller's Report. (Available at Nevada State Division of Water Resources)
6. Copy of *recorded* parcel map or *recorded* subdivision map. (Available at the Clark County Recorder's Office)
7. Fees will be as follows, depending on individual situation:
  - \$160.00 for a Tenant Improvement with **or** without plumbing.
  - An additional \$275.00 fee will be due for all Tenant Improvements that require an inspection of a direct connection to a septic tank or for verification of property compliance.
  - An additional \$551.00 fee will be due to permit a new septic system or an unpermitted system per the Residential Septic Tank Permit Application Requirements.

Cash, money orders, and cashier's checks are acceptable forms of payment but **personal checks are not accepted.**

8. A letter from a licensed plumber, detailing the number of individual fixtures **and** specifying how many toilets are low-flow (1.6 gallons) is required if the Southern Nevada Health District (SNHD) does not have a fixture count on file, if tenant improvements have been done to the property without SNHD approval, or if customer wants to reduce fixture unit count on the existing permit for low-flow toilets.
9. *Additional information may be required and will be determined on an individual basis at the Septic Counter.*

**NOTES:**     \*No portion of the septic system can be under pavement or in an area subject to vehicular traffic or within ten (10) feet of any trees. Tenant Improvements which impact the septic system **will not** be approved until **all** compliance issues are resolved.

**\*\*If the property is served by a Community Well, please call the Nevada State Division of Water Resources (NSDWR) at 702-486-2770 to make sure that all fees are current, all paperwork has been filed, and additional plumbing can be approved. Any issues with NSDWR will need to be corrected prior to the Health District processing a Tenant Improvement.**

**TELEPHONE NUMBER:** 759-0660

**HOURS:** 8:00 A.M. - 3:30 P.M.

**CLOSED FOR LUNCH:** 12:30 P.M.-1:30 P.M.

**CALCULATION SHEET FOR SIZING OF  
RESIDENTIAL INDIVIDUAL SEWAGE DISPOSAL SYSTEM (ISDS)**

<u>FIXTURE UNIT CALCULATION</u>			
Water Closets *	2 ea x	_____	= _____
Bathtubs	2 ea x	_____	= _____
Showers	2 ea x	_____	= _____
Double lavs	2 ea x	_____	= _____
Single lavs	1 ea x	_____	= _____
Dble sink kit	2 ea x	_____	= _____
Wet bar	1 ea x	_____	= _____
Clothes Washer	2 ea x	_____	= _____
Laundry tub	1 ea x	_____	= _____
Bidet	2 ea x	_____	= _____
Floor drain	2 ea x	_____	= _____
Veggie sink	1 ea x	_____	= _____
TOTAL FIXTURE UNITS			_____
Min. Septic Tank Size (Gallons)			_____
Min. Leach Field (Sq. Ft)			_____

<u>SIZE REQUIREMENTS</u>		
FIXTURE UNITS SERVED	MIN TANK SIZE	LEACH FIELD SQ. FT <sup>1</sup>
0 – 20	1,000	775
21 – 25	1,200	935
26 – 35	1,500	1,165
36 – 45	2,000	1,550
46 – 55	2,250	1,745
56 – 60	2,500	1,940

<b>RECOMMENDED DIMENSIONS OF LEACH FIELD</b>	
<u>775 Sq. Ft.</u>	<u>935 Sq. Ft.</u>
12 x 65	12 x 78
18 x 43	18 x 52
24 x 33	24 x 39
30 x 26	30 x 31
<u>1,165 Sq. Ft.</u>	<u>1,550 Sq. Ft.</u>
18 x 65	18 x 86
24 x 49	24 x 65
30 x 39	30 x 52
	36 x 43
<u>1,745 Sq. Ft.</u>	<u>1,940 Sq. Ft.</u>
18 x 97	24 x 81
24 x 73	30 x 65
30 x 58	36 x 54
36 x 49	42 x 47

\*If existing, the fixture count may be different

NOTES(S):

Rough plumbing stub-out will determine depth of ISDS. (See Footnotes Below)

<u>Minimum Horizontal Separation Distance From:</u>	<u>Shallow<sup>2</sup></u>		<u>Deep<sup>3</sup></u>
	<u>Septic Tank</u>	<u>Absorption System</u>	<u>Absorption System</u>
Building or Structure	8 Ft.	8 Ft.	20 Ft.
Property Line	10 Ft	10 Ft	10 Ft
Water Supply – Wells	100 Ft.	100 Ft.	150 Ft.
Streams or Watercourses	100 Ft.	100 Ft.	150 Ft.
Soil Disposal Systems	5 Ft.	---	---
Community Water Main Lines	10 Ft	25 Ft	25 Ft
Individual Water Service Lines	10 Ft	25 Ft	25 Ft
Swimming Pool/Spa Water Lines and Equipment	10 Ft	25 Ft	25 Ft

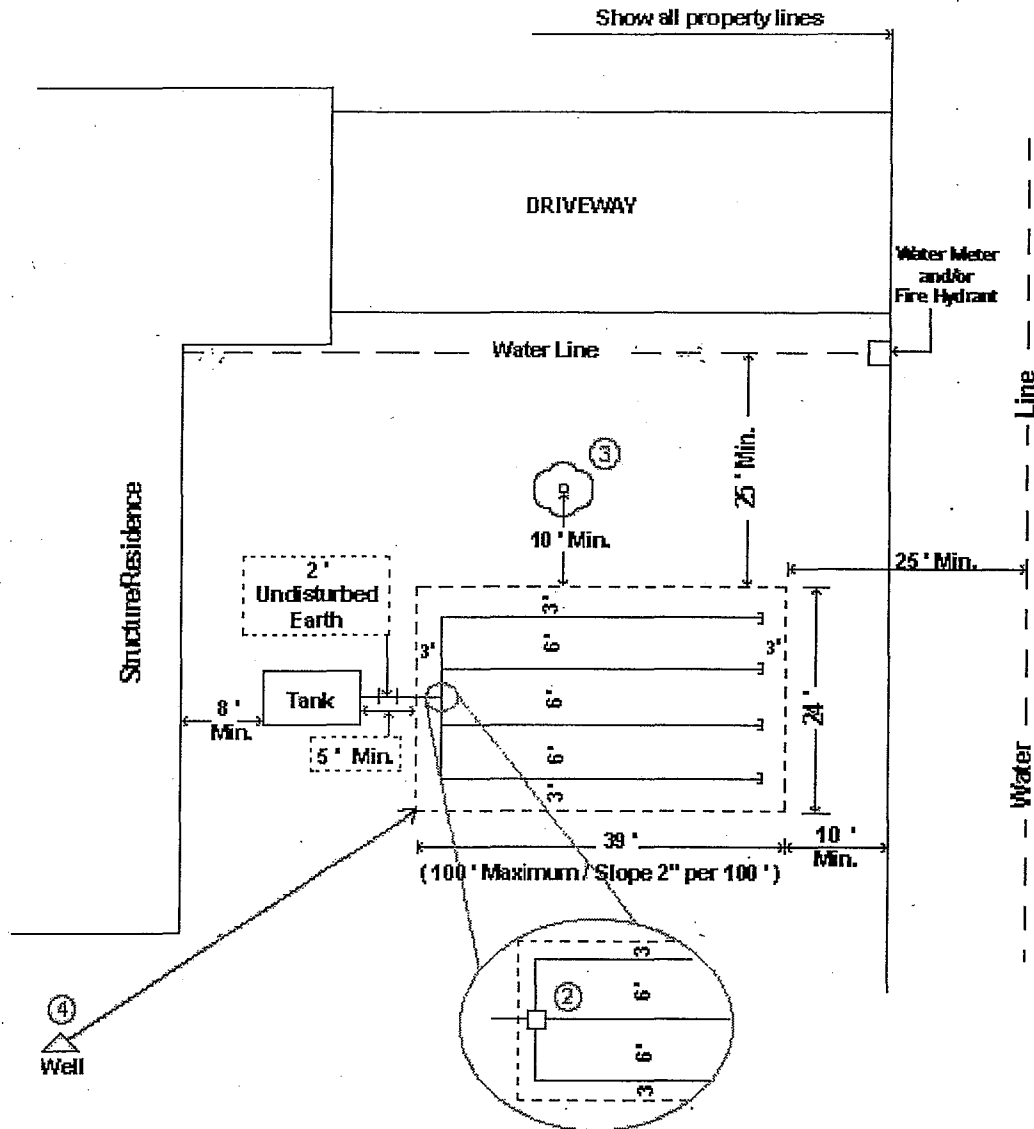
<sup>1</sup> Utilizing standard 15 min. percolation rate for shallow absorption systems less than 4' deep

<sup>2</sup> Four feet (4') deep or less from ground surface to bottom of system

<sup>3</sup> Greater than four feet (4') deep from ground surface to bottom of system two (2) percolation tests and soil borings will be required

**SOUTHERN NEVADA HEALTH DISTRICT  
TYPICAL PLOT PLAN  
FOR  
INDIVIDUAL SEWAGE DISPOSAL SYSTEM (ISDS)**

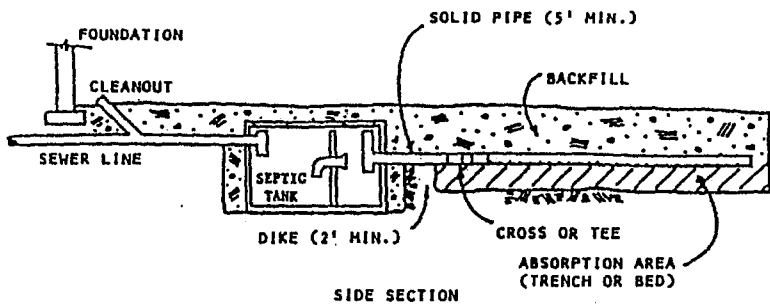
①  
N  
Scale  
(1" = 20')



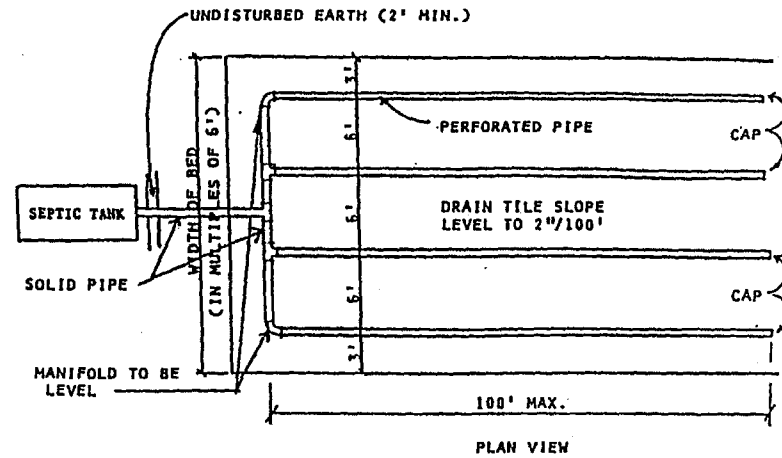
- 1 All plot plans submitted must be **drawn to scale**. (Engineering or Architectural)
- 2 A **Distribution Box** is required with any ISDS greater than 2000 gallons or a system utilizing an odd number of leach lines or trenches. (Inlet hole will be higher than the outlet holes.)
- 3 **No trees** within ten (10) feet of any portion of ISDS.
- 4 Shallow septic systems must be a minimum of 100 feet from all wells. Deep soil absorption systems must be a minimum of 150 feet from all wells.

**NO paving and No vehicular traffic allowed over the ISDS**

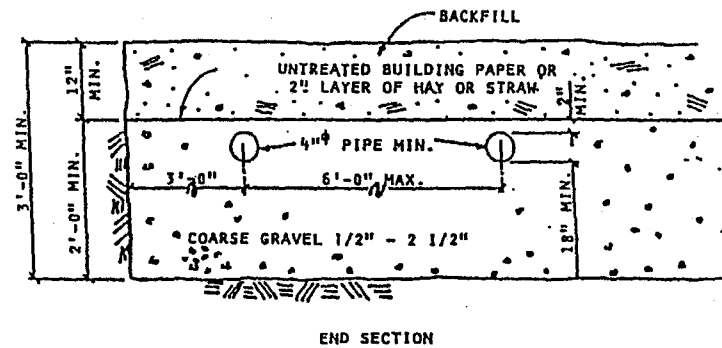
(SEE REVERSE SIDE)



CLARK COUNTY HEALTH DISTRICT  
INDIVIDUAL SEWAGE DISPOSAL SYSTEM



RECOMMENDED SCHEDULE OF SEPTIC TANK INSIDE DIMENSIONS				
CAPACITY GALLONS	TANK WIDTH	TANK LENGTH	LIQUID DEPTH	TOTAL DEPTH
1000	4' - 0"	8' - 0"	4' - 6"	5' - 6"
1200	4' - 6"	8' - 6"	4' - 6"	5' - 6"
1500	4' - 6"	10' - 0"	4' - 6"	5' - 6"
2000	5' - 6"	11' - 0"	4' - 6"	5' - 6"
2250	5' - 6"	11' - 0"	5' - 0"	6' - 0"
2500	6' - 0"	12' - 0"	4' - 9"	6' - 0"



TYPICAL SEEPAGE BED