



Reviewer	Applicant		
Yes Missing NA	Initials	Page(s) in Report	ELEMENT DESCRIPTION
<b><u>General</u></b>			
			Application form provided & signed by owner, plus contact info for consultant.
			Filled out fee sheet & check made out to DEQ
			Completed & signed copy of Part 4 Checklist
			Vicinity Map Provided
			Copy of plat or COS (or deed if aliquot parts or proposing Aggregation of lots)
			4 copies of lot layout sheet(s); Facilities labeled as Existing or Proposed
			Copy of any existing COSA for reviewed lot(s)
			Floodplains shown on drawings & any applicable documentation provided (LOMAs)
<b><u>Onsite Wastewater</u></b>			
			Copy of any existing WWTS permits for reviewed lot(s)
			Proof of pumping for septic tanks within last 3 years, unless system less than 5 years old
			Soil profile descriptions
			Seasonal high groundwater addressed (results or letter indicating in process)
<b><u>Non-degradation</u></b>			
			Nondegradation info IF new development proposed, if expansion of existing development proposed, or for change in use (residential to commercial, etc.)
<b><u>Onsite Water</u></b>			
			Copy of any existing well logs for wells on reviewed lot(s), for wells sampled, & for wells used for hydraulic conductivity estimates
			Information about water quality, quantity & dependability (water tests & aquifer well logs)
<b><u>Public Water or Sewer</u></b>			
			If extensions or connections to existing public water/wastewater proposed, "will serve" letter or copy of current bill from public facility owner if connected
<b><u>Stormwater</u></b>			
			Stormwater drainage report & plans
<b><u>Other documents</u></b>			
			Special Requests - Prior to full design (waivers, deviations, water availability analysis, non-degradation predetermination, etc.)
			Sage Grouse documentation provided
			Modified Site Plan
<p>Copy of This checklist <b><u>AND</u></b> (<i>circle one</i>)</p> <p><b>COMPLETE LETTER</b> or <b>INCOMPLETE LETTER</b> sent on:</p> <p><b>REVIEWED BY:</b> _____ <b>AGENCY:</b> _____</p>			