



MASON COUNTY COMMUNITY SERVICES

Building, Planning, Environmental Health, Community Health

415 N 6th Street, Bldg 8, Shelton WA 98584,
Shelton: (360) 427-9670 ext 400 ❖ Belfair: (360) 275-4467 ext 400 ❖ Elma: (360) 482-5269 ext 400
FAX (360) 427-7787

Private Two-Party Water Systems

Private two-party water systems are considerably less complex and expensive to construct than public water systems. However, not every two-party water system proposed can be approved. Review the following eligibility requirements.

Eligibility

The water system must be for one existing parcel or two existing parcels that are contiguous unless easements are obtained.

If the lots were created after January 1, 1995

They must meet minimum lot sizes of 1.0 to 2.5 acres depending on the soil type and septic design. Lots less than the minimum lot size are subject to public water system requirements.

If the lots were created in 1994 or earlier

The location of all existing and planned encumbrances must meet individual well setbacks. The land subdivision approval by Mason County that created your lot was for lots with private wells.

Application

A complete application is required to ensure an efficient review without delays. Be sure and submit the following items to Mason County Public Health ATTN: Drinking Water Program. Do not enclose them with an application for water adequacy or a building permit application. Two-Party applications have a two-step review process; 1. A well site inspection to review the water source and possible sources of contamination. 2. Review of all related documents and septic records to determine adequacy.

- ❑ **Application for Review of a Two-Party Water System:** Complete page 1 of this 2-page application form. A well site inspection fee and two party water system fee will be required. Refer to Mason County Environmental Health fee schedule for cost. The following items will be required for final approval.
- ❑ **Satisfactory bacteriological test** (less than 12 months old). Any certified drinking water laboratory can perform this test. You can pick up sample bottles at Mason County Public Health and return them on a Monday or Tuesday along with a check to Thurston County for sample testing.
- ❑ **Well Log** Submit a well log (if possible) and a well capacity test (often in the lower left section of the well log). Contact a well driller if a capacity test is needed. The well driller that drilled the well or the Washington State Department of Ecology (360- 407-6859) may be able to help you find the well log. You can also search for well logs on-line on the Department of Ecology's WEB page at <http://apps.ecy.wa.gov/welllog/>
- ❑ **Notice to Future Property Owners of Private Two-Party Water System** Be careful to complete the form properly and then get the document signed and notarized. Record the document at the Mason County Auditor's Office (411 North 5th Street, Shelton) and submit a copy to this office. See Recommendations for Recorded Documents and Permits (attached).
- ❑ **Septic Records** If applicable septic records will be utilized during review to ensure setbacks are being met. If there is setback concerns and septic records are lacking, additional locating requirements may apply.

FOR EXISTING WELLS: When all the above items have been submitted, the application will be reviewed for approval.

FOR NEW WELLS: The Bacteriological test and Well Log (capacity test) may be deferred until after well site inspection is completed/approved. All items must be submitted for water system review and approval.



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Where Should I Site My Well?

Individual or Private Two-Party Well Siting

The setbacks and placement consideration for an individual well are:

- ❑ The well site should be located on the highest ground possible, up-slope from potential contamination sources.
- ❑ The well site should be protected from a one hundred year flood and from any surface or subsurface drainage that may impair the quality of groundwater.
- ❑ The following minimum distances shall be maintained:
 - 5 ft from building (from farthest overhang such as eave edge)
 - 50 ft from septic tanks, septic containment vessels, septic holding tanks, septic chamber and d box, building sewers, collection and non-perforated distribution pipe.
 - 100 ft from sewage system drainfields including proposed and reserve sites provided that the design has been approved for installation by Mason County Health Services, outhouses, manure lagoons, sewage lagoons, industrial lagoons, hazardous waste sites, sea-salt water intrusion areas, livestock barns and livestock feed lots, pipelines used to convey materials with contamination potential, chemical and petroleum storage areas.
 - 1000 ft from solid waste landfills.
- ❑ In addition, the Mason County Planning Department administers several regulations, which govern the location of development activities such as wells in relation to critical areas including saltwater, streams, wetlands and steep slopes. Prior to drilling Mason County Planning needs to be contacted if a Resource Land and Critical Areas Checklist (RLC) has not yet been done for your property. The RLC will identify these critical areas and their setback for you.
- ❑ A utility permit may be required by the Mason County Public Works Department or from the Department of Transportation for work done in or near right-of-ways. Road crossings for the installation of water/septic lines are included in this process. For a determination or for requirements involved in this permit process, please contact Mason County Public Works Department at (360) 427-9670 Ext. 450.



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Date Received:

Amount Received:

Received By:

WEL

TWO-PARTY PRIVATE WATER SYSTEM APPLICATION

APPLICANT		PHONE	
MAILING ADDRESS – STREET, CITY, STATE, ZIP			
SITE ADDRESS – STREET, CITY, STATE, ZIP			
PRIMARY PARCEL NUMBER (WELL SITE)			
SECONDARY PARCEL NUMBER (IF APPLICABLE)			
WATER SOURCE <input type="checkbox"/> New <input type="checkbox"/> Existing	SOURCE TYPE <input type="checkbox"/> Well <input type="checkbox"/> Spring	PARCEL 1 LOT SIZE	PARCEL 2 LOT SIZE
PROPOSED WATER SYSTEM NAME (REQUIRED)			
PROJECT DESCRIPTION			
DIRECTIONS TO SITE/ CONDITIONS			

Site Plan: (may also be attached)

(property boundaries, structures, well site w/100' radius, driveways, roads, septic/sewer components and lines, easements, etc...)

Submittals Checklist: (these additional items will be required for approval)

- Satisfactory Bacteriological sample (this may be deferred if well is not yet drilled)
- Well Log with pump test or 4-hour capacity test performed by driller (this may be deferred if well is not yet drilled)
- Notice to Future Property Owners recording (record with Mason Co. Auditor, supply copy of recorded document)
- Septic Records (additional locating requirements may apply if there is a lack of septic records on file)

This form may be scanned and available for public view on the Mason County Web site.

Revised: 10/13/2021

Review Step 1: Well Site Inspection:

YES NO NA

- Evidence of existing sources of contamination within 100 foot radius of water source? (drainfields, tanks, buildings; indicate distance on plot plan)
- Are there roads within the 100 foot radius of the water source? If so, is road private, County or State. What is distance to ROW? _____
- Does the ground slope away from the water source site? (show slope on plot plan)
- Is the well cap satisfactory?
- Screened and vented?
 The well casing extends _____ above level ground / concrete slab? (circle one)
- Is there evidence of a surface seal?
- Does the seal appear adequate?
- Is a variance necessary for well site approval?

Comments _____

Pass Fail Inspector _____ Date _____

Review Step 2: Two-Party Review:

YES NO NA

- Water Well Report with adequate pump test on file?
If NO, date of Capacity Test _____ Driller _____ GPM _____
- Received Satisfactory Bacteriological Analysis? Date of test _____
- Received Signed, Notarized, and Recorded Notice? AFN _____
- System appears adequate to serve 2 single-family residences based on information provided?

Comments _____

Approved Denied Reviewer _____ Date _____

Findings in this review reflect observed conditions as they existed on the day of the site inspection. No claim is made, express or implied of the future success or failure of this system. Well site approval does not constitute water system approval. Water System approval is a two-part process.

All proposed connections to new wells are subject to water adequacy requirements at time of building permit per MCC 6.68. Water usage restrictions and additional fees may apply to all new wells drilled after January 19th, 2018 per ESSB 6091.

Return To

Grantor(s): (1) _____, (2) _____

Grantee(s): (1) PUBLIC

Legal Description (1) _____
(Abbreviated form: i.e. lot, block, plat or section, township, range)

Assessor's Tax Parcel: (1) _____ - _____ - _____

NOTICE TO FUTURE PROPERTY OWNERS OF PRIVATE TWO-PARTY WATER SYSTEM

I (We) the undersigned grantor(s), certify that the water source located on the above-described real estate under **Legal Description (1) and Assessors Tax Parcel (1)** situated in Mason County, State of Washington, has been designated to serve a source of water to the following parcels situated in Mason County, State of Washington; herein described:

Tax Parcel: (Connection 1) _____ - _____ - _____

Tax Parcel: (Connection 2) _____ - _____ - _____

The system owner is responsible for keeping this system in compliance.

The name of the water system is: _____

This system is designed to provide for two service connections. Planning and design approvals must be obtained from the department prior to expanding beyond this number of services. Additionally, a water right, obtained from the Department of Ecology, is required if the water system exceeds exemption standards.

This system (has/ has not) been granted one or more waivers from specific provisions of the regulations.

Dated on this _____ day of _____, 20____.

Signature of Grantor(s):

(1) _____, (2) _____

State of Washington)
County of Mason)

I, the undersigned, a Notary Public in and for the above named County and State, do hereby certify that on this _____ day of _____, 20____ ,
_____ personally appeared before me, who is known to be signer of the above instrument, and acknowledged that he (she) (they) signed it.
GIVEN under my hand and official seal the day and year last above written.

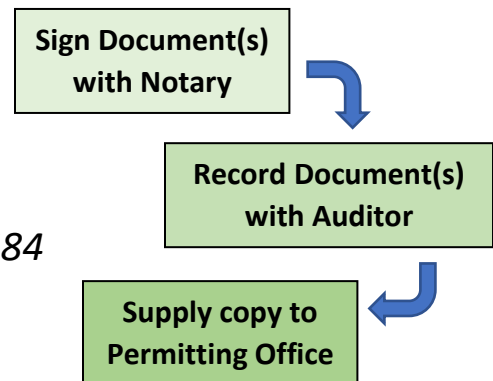
Notary Public in and for the State of Washington,
residing at _____
My commission expires: _____

Recommendations for Recorded Documents and Permits

County supplied recording documents are formatted to meet state and county requirements. Mason County staff are not responsible for how these documents are altered by the owner, applicant, or contractors.

- Do not alter scale when printing document(s). Print on 8.5x11 paper only.
- Do not write or stamp within the margins.
- Do not cut or fax the document(s).
- Prior to submitting completed document(s) back to permitting office, record with/at:

*Mason County Auditor
PO Box 400 – Shelton, WA 98584
411 N. 5th Street - Shelton, WA 98584
460-427-9670, ext. 467*



- Make sure all pages are recorded, most of the county supplied documents are now 2 pages to meet format requirements.
- Recording fees will apply to record document. Contact the Auditors office for current fees, or visit their website:
<https://masoncountywa.gov/auditor/index.php>
- After documents are recorded, return a copy with AFN recording number to the permitting office requesting the document(s):

Public Health

415 N. 6th Street
Shelton, WA 98584
360-427-9670, ext. 400

Permit Assistance Center

615 W. Alder Street
Shelton, WA 98584
360-427-9670, ext. 352