New Mexico Environment Department
Environmental Health Bureau
Liquid Waste Program

Application for Homeowner Qualification Certificate

☐ Conventional ☐ Modify Treatment Unit ☐ Modify Disposal Field

Section 1 Homeowner Information

NMED USE ONLY

Liquid Waste Processing Number:

Name (Property Legal owner(s)):

Field Office ID: | Application Date:

E-mail address(es): | Phone: | Existing System Permit Number(s):

System Location: Physical Address, - (if needed, attach directions) | Mailing Address (Invoices, permits, official correspondence):

City: | State: NM | Zip Code: | City: | State: | Zip Code:

Uniform Property Code: | Date of Record: | Lot Size (0.01 acres): | Total No. LW Systems on Property: | Total Design Flow on Property:

Subdivision: | Subdivision Plat Date: | Unit/Phase: | Block | Lot/Tract | Township | Range | Section

Water Supply Source: ☐ Onsite ☐ Offsite ☐ Storage ☐ Private ☐ Public ☐ Shared

No. Connections:

OSE Well Permit No. *(505)827-6120* *https://www.ose.state.nm.us/WRAB/index.php*

Private Water Well Location (long., lat. or physical address, city, state):

Public Water System Name:

Irrigation well, flood irrigation area on lot? ☐ YES NO ☐

Enter all LW permit nos. for lot:

Will a petition for variance be submitted with this application? ☐ YES NO ☐

Section 2 Homeowner Qualification Requirements

Request for Homeowner Qualification Certificate | Phone: | Request Training Material in language (circle one): English / Spanish / Other:

☐ I have received training materials as provided by the department. ☐ I have received a copy of Liquid Waste Disposal and Treatment Regulations NMAC 20.7.3

20.7.3.904 REQUIREMENTS FOR HOMEOWNER QUALIFICATION:
(1) A homeowner must become qualified to install an on-site liquid waste system by passing an exam administered by the department.
(2) Homeowner training materials and opportunities for exams, by appointment, shall be available at all department field offices.
(3) A qualified homeowner may apply for a permit to install or modify a conventional on-site liquid waste treatment and disposal system serving the qualified homeowner's personal residence in accordance with Subsection C of 20.7.3.401 NMAC.
(4) A qualified homeowner shall not install or modify an on-site liquid waste system serving a rental unit, or other property that is not the qualified homeowner's personal residence.
(5) A homeowner qualification shall be valid for one year from the date of issuance of qualification; the department may extend the qualification beyond one year for good cause shown.
(6) A qualified homeowner may install no more than one liquid waste system during a twelve-month period.
(7) A qualified homeowner who self-installs a system shall not compensate any person to perform any phase of the system construction, unless that person holds a valid and appropriate classification of contractor's license issued by the New Mexico construction industries division.

I as a qualified homeowner who self-installs a system shall not compensate any person to perform any phase of the system construction, unless that person holds a valid and appropriate classification of contractor's license issued by the New Mexico Construction Industries Division, required licenses are MM-1, MM-98, MS-1, or MS-3.

Section 3 Authentication / Verification

By signing below, I attest that the information in this application is correct and true to the best of my knowledge. I understand the issuing of this permit does not relieve me from the responsibility of complying with all applicable provisions of the New Mexico Plumbing Code and the New Mexico Liquid Waste Disposal and Treatment Regulations. Obtaining this qualification does not relieve me from the responsibility of obtaining any permit required by state, city or county regulation or ordinance or other requirements of state or federal law.

Homeowner Printed Name: | Homeowner Signature: | Date Signed:

NMED USE ONLY

NMED Homeowner Qualification Exam

Exam administered by; name printed: | Title: | Exam Date: | ☐ Pass

Exam scored by; name printed: | Title: | Score: | ☐ Fail

Homeowner is Qualified to install LW SYSTEM (with indicated components) ☐ Septic Tank ☐ Holding Tank ☐ Split Flow ☐ D-box ☐ Drop Box ☐ Tee

☐ Pipe & Gravel ☐ Synthetic Aggregate ☐ Chamber ☐ Seepage Pit ☐ Absorption Bed ☐ Elevated Disposal Field

NMED LIQUID WASTE Permit FEES

☐ Homeowner Qualification Certificate $170 ☐ Conventional-1000gpd $225 ☐ 1001-2000gpd $325 ☐ 2001-5000gpd $425 ☐ Variance small system $100

Total Fee Paid | Date Paid | Payment Received By

NMED Official Name Printed: | NMED Official Signature: | Date:

Homeowner Qualification Status ☐ Cancelled ☐ Denied ☐ Expired

Homeowner notification, date, via, provide comments:

Qualification Date: | Qualified Permit Number: | Qualification Expiration Date:

NMED Official Name Printed: | NMED Official Signature: | Date:

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If your lot has more than one LW system, you must fill out a separate application for each system. The site plan drawing must show all liquid waste systems located on your lot. Existing permitted systems must be identified with their LW Permit #. New, modified or unpermitted systems must be clearly labelled on the site plan. NMED agents are not authorized to amend or complete any portion of this application.

Liquid Waste Processing Number: ☐ Amendment

Treatment & Disposal System Design

Section 1 Design Flow, Hydrology, and Soil Description

A. Wastewater Sources & Design Flow Calculations

RESIDENTIAL

Facility	Units (enter number)	(Q) Flow, gpd
☐Single Family Residence A (Qualified Homeowners Personal Residence)	Bedrooms:	Flow:
☐Single Family Residence B	Bedrooms:	Flow:
Note: A qualified homeowner can only install a single system. That system may serve two residences however one of the structures must be the qualified homeowner's personal residence. The additional structure cannot be a rental unit.		
	Total Flow for this LW System: Q=	Total Flow:

B. Hydrology Data (depth to limiting layers)

Depth from ground surface to:	Feet
Seasonal high-water table	
Bedrock	
Caliche	
Clay soils, tight clay	
Gravel, cobbles, highly permeable soil, greater than 30% gravel	

Test Hole / Soil Borings Used: ☐ YES NO ☐

Soil Classification Methodology used: ☐ Jar Test

☐Laboratory: ☐ Hand Sampling

☐Other (test method): ☐Sieve

C. Soil Description:

Type	AR=
☐Type Ia: Coarse Sand (or up to 30% gravel)	1.25
☐Type Ib: Medium Sand, Loamy Sand	2.0
☐Type II: Sandy Loam, Fine Sand, Loam	2.0
☐Type III: Silt, Silt Loam, Clay Loam, Silty Clay Loam, Sandy Clay Loam	2.0
☐Type IV: Sandy Clay, Silty Clay, Clay	5.0

Section 2. Treatment Unit and Pump Design:

A. Primary Treatment Unit ☐Septic Tank(s)

No. Septic Tank(s) | Manufacturer: | Series / Model / Certification No.: | Capacity (gallons) | Cover Depth

Tank Bedded in: (circle one) Undisturbed Soil / Compact Soil / Pea Gravel / Sand

Tank Backfill: (circle applc.) Native soil with no rocks 6" lift compaction or Pea Gravel 12" lift compaction / Sand

(Tanks are approved for max 3' cover unless otherwise approved / marked)

B. PUMP

☐Pump Tank	Manufacturer:	Series / Model:	Capacity (gallons)	Cover Depth:
☐Pump ☐Dual Alternating Pump	Manufacturer:	Series / Model:	Pump Curve Attch'd: ☐YES NO☐	Effluent Pump: ☐YES NO☐

All Tank Burial Instructions Attached. Applicant has read and understands proper burial instructions & will adhere to:
☐YES NO☐ Initial Here:

Section 3 Disposal System Design, Components and Calculations

A. Minimum Required absorption area, calculated (Multiply Design Flow (Q) times Application Rate (AR)): Q | X | AR | = | Min. Sq. Ft. Required: | Existing Sq. Ft. utilized: | + | Proposed Sq. Ft.: | = | Total Disposal Area Sq.Ft.

B. Design Components: ☐Distribution Box ☐Tee ☐ Drop Box ☐Alternating Drainfield Valve ☐ Other:

C. CONVENTIONAL

1. Discharging

☐Pipe & Gravel ☐Elevated System	Trench Width:	Depth Gravel Below Pipe:	Total Linear Feet:	No. of Trenches:	Max Trench Depth:	Length, each trench:	Trench Spacing (ft):	Proposed Sq. Ft.:
☐Chamber ☐Synthetic Aggregate. ☐Elevated System	Mfr. Model No & Sizing Credit (sf/lf, or unit).:		Total Linear Feet:	No. of Units:	Max Trench Depth:	Length, each trench:	Trench Spacing (ft):	Proposed Sq. Ft.:
☐Seepage Pit ☐Absorption Bed ☐Elevated System	Dimensions (L x W):		Depth below invert:	Proposed Sq. Ft.:	Max Trench Depth:	☐ET Bed (unlined, gravity fed) (fine to med Sand ASTM Specs Attached?) ☐ YES NO ☐		

2. Non-Discharging

☐Holding Tank	No. of Tank(s)	Manufacturer:	NM Certification No.:	Capacity:	Cover Depth:	High Water Alarm at 80%? ☐ YES NO ☐ Set at:_____"
☐Vault	☐Other (description):		☐Privy (outhouse)	☐Split Flow: (complete holding tank section & septic tank & conventional disposal section)		

Section 4 Setbacks, Site Plan & Attachments

(check those that apply)

☐ YES NO ☐ 1. Does proposed system meet all setbacks required per Table 302.1?

☐ YES NO ☐ 2. Site plan attached which shows all structures, LW systems, and wells / waters within 200', with all setbacks clearly shown?

Supporting Documents Included: ☐Survey or ☐Plat ☐Floorplan ☐Warranty Deed or ☐Tax Bill ☐Other:

1. NMED Liquide Waste program web pages: Home Page, Approved Products, and Qualified Home Owner
2. Video: Homeowner Installation Study Guide (English) - Old but still useful
3. Video: Guía para el Dueño de Casa: Cómo Instalar un Tanque Séptico y Campo de Desagüe (Spanish Version) - Old but still useful (ß Spanish Translation)
4. Office of the State Engineer Interactive Well Location Map
5. County Property Information: Bernalillo, Catron, Chaves, Cibola, Colfax, Curry, De Baca, Dona Ana, Eddy, Grant, Guadalupe, Harding, Hidalgo, Lea, Lincoln, Los Alamos, Luna, McKinley, Mora, Otero, Quay, Rio Arriba, Roosevelt, Sandoval, San Juan, San Miguel, Santa Fe, Sierra, Socorro, Taos, Torrance, Union, Valencia