WPCLF 2025-26

Group	Address	Street	Township	System Type	Funding	Homeowner
#4	317	Carolina Ave	Liverpool	NPDES	100%	0%
	46887	McDonald St.	St Clair	NPDES	100%	0%

WELL 2023 24

Columbiana County Health District

P.O. Box 309 – 7360 State Route 45 – Lisbon, Ohio 44432
Phone: 330-424-0272 – **General Fax:** 330-424-1733 – **Nursing Fax:** 330-424-1843
Email: cchd@columbiana-health.org **Web:** www.columbiana-health.org

Awarded 2022

~~☐ Application for Site Review Fee: $300~~ ☐ Application for a Soil Evaluation **Fee: $595** ~~Deck Fee: $200~~

Site Address: 317 Carolina Ave Parcel #: 36010001000 Township: Liverpool

Lot Number/Subdivision Name: _____ Lot Size: _____ No. of Bedrooms: 3

Applicant's Name: Jack Morrell Sr Mailing Address: 317 Carolina Ave

City: East Liverpool State: Ohio Zip: 43920 Date: 4/12/23

Contact Name: Jack Morrell Sr Contact Phone: 330 843 2621

FOR HEALTH DEPARTMENT USE ONLY

Soil Data Soil Evaluator: _____ Date: _____ Test Hole(s): _____

Primary Treatment

Septic Tank *total volume required:* ___ 1000gal ___ 1500gal ___ 2000gal ___ 2500gal ___ other: _____

Pretreatment Unit: ☐ 1ft depth credit ☐ 2ft depth credit ☐ NPDES System

Secondary Treatment

Slope: _____% Infiltrative Distance: _____inches ILR: _____ LLR: _____ Table Location: _____

Estimated Flow: _____GPD Minimum Sq.Ft. of Absorptive Area: _____ Minimum Length: _____

Depth to limiting layer_____ Type_____ Required VSD _____

Drain

☐ Inceptor ☐ Curtain ☐ Engineered Drain Depth: _____ ☐ Diversion Swale

Comments: Small lot no room for on site replacement

THIS IS NOT A PERMIT TO INSTALL: NO PERMIT WILL BE ISSUED UNTIL AN APPROVED DESIGN PLAN, HOUSE PLANS AND A TAX MAP OF THE PROPERTY IS SUBMITTED, IF APPLICABLE.

☐ **APPROVED**- Adequate length/width is available for a Sewage Treatment System.

☐ Based on the information submitted, it cannot be determined if the lot is suitable for a Sewage Treatment System, see comments for additional needed information.

☒ Based on the information submitted, this lot is not suitable for an on-lot Sewage Treatment System. NPDES permit is required from the OEPA for approval of an off-lot discharging system.

☐ **DISAPPROVED**- This property is not suitable for a Sewage Treatment System.

Site Evaluated By: Kim Smith Date: 12/08/23

Our Vision: "A safe community of healthy people"

317 CAROLINA AVE

36-04001.000

General Info | Tax | History | Distribution | Levy | Tax Estimator

Property Information

Parcel ID	36-04001.000
Owner Name	MORRELL JACKIE R JR
Owner Address	317 CAROLINA EAST LIVERPOOL OH 43920
Tax District	36 LIVERPOOL TWP-E LIVERPOOL CSD
School District	1504 EAST LIVERPOOL CSD
Neighborhood	17917 EAST LIVERPOOL CITY
Use Code	510 One Family Dwelling
Acres	.00000

Description

13 HOMELAND 90 L/E TO JACK MORRELL & CONNIE MORRELL 1/26/23

Property Address:

317 CAROLINA AVE

Tax Payer Address:

MORRELL JACKIE R JR
317 CAROLINA RD
EAST LIVERPOOL OH 43920
USA

		Current Value		Recent Transfer	
Board of Revision	N	Mkt Land Value	$12,600	Account Number	36-00035.037000
Homestead/Disability	N	CAUV	$0	# Parcels	1
2.5% Reduction	Y	Mkt Impr Value	$53,200	Deed Type	EX-EXEMPT
Divided Property	N	Total	$65,800	Amount	$0
New Construction	N	**Current Tax**		Sale Date	1/26/2023
Foreclosure	N	Annual Tax *	$938.68	Conveyance	
Other Assessments	N	Paid **	$938.68	Deed #	112
Front Ft.	0	Delq	$0.00		

<< Previous Card Card 1 of 1 Next Card >>

Dwelling Information

Sq Ft Finished	1344	Room Count	6	Fireplace(s)	1
1st Floor Area	672	Story Height	2	Year Built	1931
Upper Floor Area	672	# Bedrooms	3	Year Remodeled	0
Half Story Area	0	Full Baths	1	Grade	100
Attic Area	0	Half Baths	0	Style	Single Fam
Finished Basement	0	Heating	Forced Air	Ext Walls	Fr
Basement Type	Full Basement	Air Cond	None		

Land

Land Type	Acres	Square Ft.	Actual Frontage	Eff. Frontage	Depth	No Of Units	Value
FRFront Lot	.26860	0	90.00000	90.00000	130.00000	0	$12,560

CAUV Land

No CAUV Land On This Property

Legal Disclaimer

Card - 1

Improvements

IMPR Type	Description	Area	Length	Width	Year Built
Addition	Br Deck	30 SQ FT			
Addition	Attch Cc Bl Garage	308 SQ FT			
Addition	Wood Deck	112 SQ FT			
Feature	Fireplace Openings	1			


Wood Aly
Wood Aly
Wood Aly
Wood Aly
Carolina Ave
Carolina Ave
Carolina Ave

RCAP **Rural Community Assistance Partnership**

Great Lakes COMMUNITY ACTION PARTNERSHIP

June 26, 2023

Jack Morrell, Sr.
317 Carolina Avenue
East Liverpool, OH 43920

Dear Jack,

Thank you for your interest in the Columbiana County Septic Program. After reviewing your application, income, and ownership eligibility on behalf of the Columbiana County Health Department, we have determined you to be eligible for the Septic Program.

Based on your income and program requirements, it will be your responsibility to contribute the following amount toward the completion of the project:

__X__ No contribution required based on income below 100% of the federal poverty guidelines.
_____ 15% of the total project costs based on income between 100-200% of the federal poverty guidelines.
_____ 50% of the total project costs based on income between 200-300% of the federal poverty guidelines.

We will be forwarding your application to the Columbiana County Health Department so they can finish the process for the Septic System Program.

If you have any questions, please feel free to contact Lori Barnes at 330-424-0272, Extension 111.

Thank you for your participation in this program.

Sincerely,

Cindy Brookes

Cindy Brookes
Sr. Rural Development Specialist
Great Lakes Community Action Partnership
Rural Community Assistance Program

WPCLF
23-24

Columbiana County Health District

P.O. Box 309 – 7360 State Route 45 – Lisbon, Ohio 44432
Phone: 330-424-0272 – **General Fax:** 330-424-1733 – **Nursing Fax:** 330-424-1843
Email: cchd@columbiana-health.org **Web:** www.columbiana-health.org

Awarded 2022

☐ Application for Site Review **Fee: $285** ☐ Application for a Soil Evaluation **Fee: $595** ☐ Both **Fee: $880**

Site Address: 46887 McDonald St Parcel #: 620033C10 Township: St. Clair

Lot Number/Subdivision Name: _____ Lot Size: 0.23Ac No. of Bedrooms: 3

Applicant's Name: Paul Lonn Mailing Address: Same

City: _____ State: _____ Zip: _____ Date: _____

Contact Name: Paul Lonn Contact Phone: 330-277-7970

FOR HEALTH DEPARTMENT USE ONLY

Soil Data Soil Evaluator: N/A Date: _____ Test Hole(s): _____

Primary Treatment

Septic Tank *total volume required*: ___ 1000gal ___ 1500gal ___ 2000gal ___ 2500gal ___ other: _____

Pretreatment Unit: ☐ 1ft depth credit ☐ 2ft depth credit ☐ NPDES System

Secondary Treatment

Slope: _____% Infiltrative Distance: _____inches ILR: _____ LLR: _____ Table Location: _____

Estimated Flow: _____GPD Minimum Sq.Ft. of Absorptive Area: _____ Minimum Length: _____

Depth to limiting layer_____ Type_____ Required VSD _____

Drain

☐ Inceptor ☐ Curtain ☐ Engineered Drain Depth: _____ ☐ Diversion Swale

Comments: Very Small lot no on site replacement option

THIS IS NOT A PERMIT TO INSTALL: NO PERMIT WILL BE ISSUED UNTIL AN APPROVED DESIGN PLAN, HOUSE PLANS AND A TAX MAP OF THE PROPERTY IS SUBMITTED, IF APPLICABLE.

☐ **APPROVED**- Adequate length/width is available for a Sewage Treatment System.

☐ Based on the information submitted, it cannot be determined if the lot is suitable for a Sewage Treatment System, see comments for additional needed information.

☒ Based on the information submitted, this lot is not suitable for an on-lot Sewage Treatment System. NPDES permit is required from the OEPA for approval of an off-lot discharging system.

☐ **DISAPPROVED**- This property is not suitable for a Sewage Treatment System.

Site Evaluated By: Kim Smith Date: 1/16/24

Our Vision: "A safe community of healthy people"

8-26-16
Rpt # 49883
OK # 2916
$ 176

General Health District

P.O. Box 309 • 7360 State Route 45 • Lisbon, Ohio 44432 • (330) 424-0272
FAX (330) 424-1733

Site Review/Soil Evaluation For a Sewage Treatment System

check application type below

☒ Application for a Site Review **Fee: $176** ☐ Application for a Soil Evaluation **Fee: $526** ☐ Both **Fee: $702**

Site Address: 46987 McDonald Street Parcel #: 620033000 Township: St. Clair

Lot Number/Subdivision Name: Glenmoor Lot Size: 0.234c No. of Bedrooms: 3

Applicant's Name: Ruth Lorah Mailing Address: ~~46987 McDonald Street East Liverpool, Oh 43920~~ 41113 Hickman Rd

City: East Liverpool State: OH Zip: 43920 Date: July 11, 2016

Contact Name: Heden Lorah Contact Phone: 330-386-3007

FOR HEALTH DEPARTMENT USE ONLY

Soil Data Soil Evaluator: N/A Date: _____ Test Hole(s): _____

Primary Treatment

Septic Tank *total volume required*: ___ 1000gal ___ 1500gal ___ 2000gal ___ 2500gal ___ other: _____

Pretreatment Unit: ☐ 1ft depth credit ☐ 2ft depth credit ☒ NPDES System

Secondary Treatment

Slope: _____% Infiltrative Distance: _____inches ILR: _____ LLR: _____ Table Location: _____

Estimated Flow: 360 GPD Minimum Sq.Ft. of Absorptive Area: _____ Minimum Length: _____

Depth to limiting layer_____ Type_____ Required VSD _____

Drain

☐ Inceptor ☐ Curtain ☐ Engineered Drain Depth: _____ ☐ Diversion Swale

Comments: Due to the lot size an off lot discharging aerator would be appropriate. - unknown discharge location possible rural bore to ditch on North side The existing system must be abandoned per code.

THIS IS NOT A PERMIT TO INSTALL: NO PERMIT WILL BE ISSUED UNTIL AN APPROVED DESIGN PLAN, HOUSE PLANS AND A TAX MAP OF THE PROPERTY IS SUBMITTED, IF APPLICABLE.

☐ **APPROVED**- Adequate length/width is available for a Sewage Treatment System.

☐ Based on the information submitted, it cannot be determined if the lot is suitable for a Sewage Treatment System, see comments for additional needed information.

☒ Based on the information submitted, this lot is not suitable for an on-lot Sewage Treatment System. NPDES permit is required from the OEPA for approval of an off-lot discharging system.

☐ **DISAPPROVED**- This property is not suitable for a Sewage Treatment System.

Site Evaluated By: _____ Date: 9/6/16

Expired

46887 MCDONALD ST

62-00883.000

General Info | Tax | History | Distribution | Levy | Tax Estimator

Property Information

Parcel ID	62-00883.000
Owner Name	LORAH ELDA RUTH
Owner Address	46887 MCDONALD EAST LIVERPOOL OH 43920
Tax District	62 ST CLAIR TWP-E LIVERPOOL CSD
School District	1504 EAST LIVERPOOL CSD
Neighborhood	15510 GLENMOOR AREA
Use Code	510 One Family Dwelling
Acres	.00000

Description

E M PT 1039 GLEN 5"" 105 TOD TO PAUL R, JOHN M, MARK W, & STEPHEN A LORAH 1/10/08

Property Address:
46887 MCDONALD ST

Tax Payer Address:
LORAH ELDA RUTH 46887 MCDONALD ST EAST LIVERPOOL OH 43920 USA

Mail to: Helen Lorah 4/9/13 Hickman Rd E. Liverpool

		Current Value		Recent Transfer	
Board of Revision	N	Mkt Land Value	$14,200	Account Number	62-0X30E.050000
Homestead/Disability	Y	CAUV	$0	# Parcels	1
2.5% Reduction	Y	Mkt Impr Value	$54,100	Deed Type	5550
Divided Property	N	Total	$68,300	Amount	$0
New Construction	N	**Current Tax**		Sale Date	1/10/2008
Foreclosure	N	Annual Tax *	$653.98	Conveyance	
Other Assessments	N	Paid **	$653.98	Deed #	2583
Front Ft.	0	Delq	$0.00		

<< Previous Card Card 1 of 1 Next Card >>

Dwelling Information

Sq Ft Finished	1128	Room Count	5	Fireplace(s)	0
1st Floor Area	1128	Story Height	1	Year Built	1960
Upper Floor Area	0	# Bedrooms	3	Year Remodeled	0
Half Story Area	0	Full Baths	2	Grade	100
Attic Area	0	Half Baths	0	Style	Single Fam
Finished Basement	0	Heating	Forced Air	Ext Walls	Fr
Basement Type	Full Basement	Air Cond	Central AC		

Land

Land Type	Acres	Square Ft.	Actual Frontage	Eff. Frontage	Depth	No Of Units	Value
FRFront Lot	.23860	0	105.00000	105.00000	99.00000	0	$14,640

CAUV Land

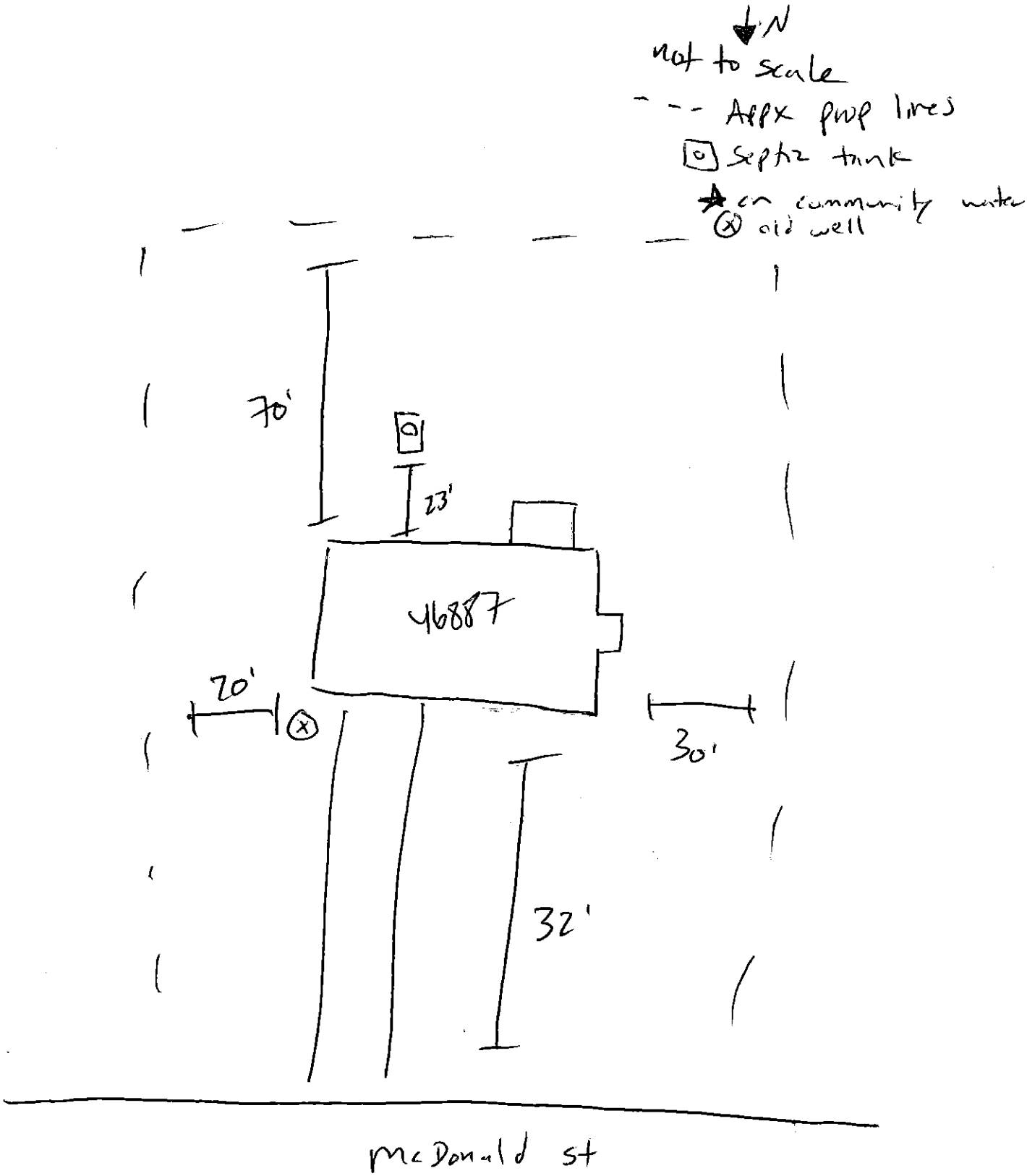
No CAUV Land On This Property

Legal Disclaimer

Card - 1

Improvements

IMPR Type	Description	Area	Length	Width	Year Built
Addition	Br Deck	140 SQ FT			
Addition	Bsmt Garage 1car	1 SQ FT			
Addition	Enc Fr Porch	28 SQ FT			
Feature	Rec Room - TY II	480			


N
not to scale
Appx pwp lines
Septic tank
on community water
old well
70'
23'
46887
20'
30'
32'
McDonald st

Ohio Environmental Protection Agency

John R. Kasich, Governor
Mary Taylor, Lt. Governor
Craig W. Butler, Director

REVISED

November 15, 2016

ELDA RUTH LORAH
49113 HICKMAN RD
EAST LIVERPOOL, OH 43920

RE: Approval of coverage under Ohio EPA NPDES General Permit for Selected New or Replacement Household Sewage Treatment Systems (NPDES Permit No. 0HL000002)

Dear Permittee:

The Ohio Environmental Protection Agency has received the Notice of Intent (NOI) for coverage under the general permit for:

Facility Name:	ELDA RUTH LORAH
Facility Street / Location:	46887 MCDONALD ST
County:	COLUMBIANA
City(ies) and Township(s):	EAST LIVERPOOL
Facility Permit Number:	**3GL01883*AG**

This site/facility is approved for coverage under the Ohio EPA general permit. Please use your Ohio EPA facility permit number in all future correspondence. Enclosed is a copy of the general permit regulating your discharge.

Please read and review the permit carefully. The permit contains requirements and prohibitions with which you must comply. Coverage remains in effect until after a renewal general permit is issued. We will contact you on how and when to reapply for continuing coverage.

If your discharge(s) is covered by a general permit which requires the submission of monitoring data you should contact your local health district to determine how monitoring data shall be performed in accordance with the table in the permit.
You may obtain current Notice of Intent (NOI), Notice of Termination (NOT) and permit transfer forms at

http://www.epa.ohio.gov/dsw/permits/gpfact.aspx

If you need to speak to someone directly, you should call a representative of your local general health district or Mark Stump of the Ohio EPA Division of Surface Water at (614) 644-2028.

Sincerely,

Craig W. Butler

Craig W. Butler,
Director

COLUMBIANA Health Department

NOV 21 2016

50 West Town Street • Suite 700 • P.O. Box 1049 • Columbus, OH 43216-1049
epa.ohio.gov • (614) 644-3020 • (614) 644-3184 (fax)

RCAP **Rural Community Assistance Partnership**

Great Lakes COMMUNITY ACTION PARTNERSHIP

June 26, 2023

Paul Lorah
46887 McDonald St.
East Liverpool, OH 43920

Dear Paul,

Thank you for your interest in the Columbiana County Septic Program. After reviewing your application, income, and ownership eligibility on behalf of the Columbiana County Health Department, we have determined you to be eligible for the Septic Program.

Based on your income and program requirements, it will be your responsibility to contribute the following amount toward the completion of the project:

__X__ No contribution required based on income below 100% of the federal poverty guidelines.
_____ 15% of the total project costs based on income between 100-200% of the federal poverty guidelines.
_____ 50% of the total project costs based on income between 200-300% of the federal poverty guidelines.

We will be forwarding your application to the Columbiana County Health Department so they can finish the process for the Septic System Program.

If you have any questions, please feel free to contact Lori Barnes at 330-424-0272, Extension 111.

Thank you for your participation in this program.

Sincerely,

Cindy Brookes

Cindy Brookes
Sr. Rural Development Specialist
Great Lakes Community Action Partnership
Rural Community Assistance Program