1701 Patricia McCollum Way, Dept. 93
Cincinnati, Ohio 45237
Phone: 513-946-7800
Website: hcph.org

HAMILTON COUNTY
PUBLIC HEALTH

PREVENT. PROMOTE. PROTECT.

Dear Sir/Madam:

This letter is in regard to the Intent to Fill form distributed by Hamilton County Public Health, Waste Management Division. The Intent to Fill form is an informational notification for use by Hamilton County Public Health and is required under Ohio Administrative Code 3745-400-05 for clean hard fill.

The form is used to notify Hamilton County Public Health of any fill operations in progress or in the future. It allows a landowner the option of placing clean hard fill (defined as construction and demolition debris consisting of reinforced or non-reinforced concrete, asphalt, concrete brick, block, tile and/or stone which can be reutilized as construction material) in an area requested to be filled. The notification allows Hamilton County Public Health to verify that filling is acceptable but differentiates this activity from open dumping or landfilling. The form requires the following information: where the fill operation is taking place, the time period the filling will occur, the nature of the fill material, where the material is from, and a contact person's phone number. To best distinguish where the fill operation is taking place, a simple drawing of the property, depicting the fill area(s) with reference structures, is required for submittal with the form. Again, **this is a notification, not a permit.**

It is the responsibility of the property owner/operator to obtain proper approvals for a filling project. Approval may be necessary based on a community's ordinances, zoning, regulations or some other governmental agency, such as Public Works or Soil and Water Conservation District.

Hamilton County Public Health will conduct periodic inspections of the fill site to verify that only material that meets the above definition of clean hard fill is used at the site. No mixed loads (solid waste, construction and demolition debris, etc.), may be brought to the site. Any sorting of materials that is necessary must be completed at the site of generation. **Only clean hard fill is allowed for filling or stockpiling at the fill site.**

If you have any questions, please notify the Waste Management Division at (513) 946-7879.

Sincerely,

Waste Management Division
Hamilton County General Health District

Enclosure

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Ohio 45237
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INTENT TO FILL REQUIREMENTS FOR HARDFILL SITES

Clean hard fill may be disposed of in any of the following four methods (OAC 3745-400-5)

1. Recycled into usable construction material.
2. Disposed in a licensed construction and demolition debris (CDD) or solid waste landfill.
3. Used to change the grade on the site of generation or removal.
4. Used to change the grade on a site other than the site of generation. When clean hard fill is placed off the site of generation, the person placing the clean hard fill shall provide a seven day "Notice of Intent to Fill".

_____
Report # (office use)

CLEAN HARD FILL DEFINITION

Material that consists only of reinforced or non-reinforced concrete, asphalt concrete, brick block, refractory brick and mortar, tile and/or stone which can be reutilized as construction material is considered "clean hard fill". **Clean hard fill cannot contain other constituents of CDD, solid waste, hazardous waste, radioactive waste.** Some refractory brick may be radioactive or hazardous and thus prohibited from use as clean hard fill or from disposal at a CDD facility (OAC 3745-400-1). **Lumber, wood, drywall and particle board are not considered to be clean hard fill and must be disposed at a licensed CDD or solid waste landfill.**

INTENT TO FILL NOTIFICATION

Please complete the information below and return to Hamilton County Public Health, 1701 Patricia McCollum Way Dept. 93, Cincinnati, Ohio 45237. **Attach a simple drawing of the property, depicting the fill area(s) with reference structures.** This notification must be received by Hamilton County Public Health at least seven days prior to filling. Please keep a copy for your records. This is a notification, not a permit. It is the responsibility of the property owner/operator to obtain any additional approvals for a fill project.

1. City, township or village of site to be filled: _____

2. _____ (Address) and _____ (Parcel Number) of site to be filled.

3. _____ (Address) and _____ (Parcel Number) of generation or removal site

4. Nature of fill material: _____

5. Date to begin filling: _____ Date to complete filling: _____

6. Person responsible for fill:

_____ (Name) _____ (Address) and _____ (Phone Number)

Email for person responsible: _____

7. Property owner:

_____ (Name) _____ (Address) and _____ (Phone Number)

I understand and agree to allow Hamilton County Public Health staff access to the property to verify fill is being conducted in accordance with the requirements of OAC 3745-400-05 noted in this form. I attest that all submitted information is correct and complete.

_____ (Property Owner (Print)) _____ (Signature) _____ (Date)

Revised 9/2026