

Onsite Wastewater Treatment System Application for Construction/Operating Permit

Print or Type

Owner/Authorized Representative First Name Initial Last Name

Business or Legal Entity Name (if applicable)

Owner Address City State Zip

Phone Number Email

☐ Check here if authorized representative and include a description of the representative's authority to sign on behalf of the owner.

Professional Engineer, Master Installer or Registered Environmental Health Specialist

Print or Type

First Name Initial Last Name Certification/License Number

Company Name

Mailing Address City State Zip

Phone Number Email

Location Legal description OR Geographical coordinates to 4 decimal points
/ Latitude Longitude
1/4 1/4 Section Township Range County

Physical address if different than owner's mailing address

System Information

☐ Dwelling-Peak single day flow gals OR ☐ Non-dwelling-Peak single day flow gals
☐ Domestic Wastewater ☐ Non-Domestic Wastewater -Description of non-domestic wastewater sources (i.e. restaurant, laundry, butcher shop, camper dump station or other)
☐ New System ☐ Modification, reconstruction or alteration of existing system
☐ Septic System ☐ Mound ☐ Holding tank ☐ Lagoon ☐ Other (if other, describe here)

Depth to seasonal high groundwater for planned location of the soil absorption system ft.

Percolation rate min/inch Maximum ground slope %

I swear or affirm that the application information and documentation submitted are true, complete and accurate.

Owner/Authorized Representative Signature

Date

NOTICE: Failure to complete the form or include the appropriate fee(s) will delay the application. DWEE issued construction permit is required prior to any construction.