



Private Sewage Disposal Permit Application

Permit Label

Other permits that may be required: Building Electrical Gas Plumbing

Permit Type: Owner Contractor

Development Permit Number: _____

Application Date (M/D/Y): _____

Estimated Installation Date (M/D/Y): _____

Owner Name: _____ **Mailing Address:** _____
City: _____ **Prov:** _____ **Postal Code:** _____ **Phone:** _____
Alt Phone: _____ **Email Address:** _____ **Fax:** _____

Contractor: _____ **Mailing Address:** _____
City: _____ **Prov:** _____ **Postal Code:** _____ **Phone:** _____
Alt Phone: _____ **Email Address:** _____ **Fax:** _____

Project Location: _____ **CITY OF WETASKIWIN**
Street Address: _____ **Subdivision Name:** _____
Unit or Suite #: _____ **Lot:** _____ **Block:** _____ **Plan:** _____ **Tax Roll #:** _____
Legal Subdivision: Part of: _____ ¼ Sect: _____ Twp: _____ Rge: _____ W of: _____
Directions: _____

System Design Criteria (complete all applicable items): **Soil Log Report from two (2) test pits with Soil Analysis Report** (attach copy)
Expected Volume of Effluent: _____ cubic meters per day gallons per day liters per day **Number of bedrooms** _____
Project Type: Commercial (Conventional) Industrial (Conventional) Residential (Conventional) **Depth to Water Table** _____
 Commercial (Advanced) Industrial (Advanced) Residential (Advanced) **Work Camp # of Men** _____
SITE EVALUATION DIAGRAM: Attach a **detailed** site diagram including the system location in relation to buildings, distance to water supply and/or surface water bodies, and other pertinent information **(AS PER PART 7 OF THE CURRENT PRIVATE SEWAGE STANDARD OF PRACTICE)**.

Project Information: New Installation Alteration **Description of Work:** _____
Components Used: Septic Tank; Working Capacity Size _____ Lagoon Packaged Sewage Treatment Plant
 Holding Tank; Size _____ Open (surface) discharge At Grade
 Disposal Field; Size _____ Treatment Mound; Size _____ Sand Filter

Permit Applicant Declaration: The permit applicant certifies that this installation will be completed in accordance with the Alberta Safety Codes Act and Regulations. The personal information provided as part of this application is collected under the Safety Codes Act and the Municipal Government Act and in accordance with the Freedom of Information and Protection of Privacy Act. The information is required and will be used for issuing permits, safety codes compliance verification and monitoring and property assessment purposes. The name of the permit holder and the nature of the permit is available to the public upon request. If you have any questions about the collection or use of the personal information provided, please contact the City of Wetaskiwin at 780.361.4431.

Installer's Name (please print) _____ Installer's Signature _____ Homeowner's Signature (Homeowner permits only) _____
Private Sewage Installer's Certification Number: **PS** _____ **Homeowner Declaration: By signing this permit I hereby certify that I own or will own and occupy this dwelling.**

Permit Fee: \$ _____ ***SCC Levy:** \$ _____ **TOTAL FEE:** \$ _____
*SCC Levy is 4% of the permit fee with a minimum of \$4.50 and a maximum of \$560
Payment Method: Visa M/C Debit Cheque Cash **Authorization / Cheque Number** _____
Credit Card #: _____ **Expiry Date:** _____ **Date of Authorization:** _____
Name of Cardholder: _____ **Signature of Cardholder:** _____

Permit Validation Section to be completed by the Plumbing Safety Codes Officer: **Inspecting SCO:** _____
Permit Conditions: _____
SCO's Name (print or type) _____ SCO's Signature _____
SCO's Designation Number: _____ Date of Issue (M/D/Y): _____



INSPECTION REQUESTS please contact Superior Safety Codes at:
Ph. 403.358.5545 Fax 403.358.5085 or
Online at www.superiorsafetycodes.com
Allow 48 hours' notice for inspection



Permit Number: _____

Name: _____

Date: _____

Private Sewage System Site Evaluation Diagram

Legal Description: _____

↑N													<p>Show the proposed location of the onsite sewage system and indicate the distances from the following:</p> <ul style="list-style-type: none"> • trees • floodplains • wells • waste sources • bedrock • outcrops • buildings • property lines • easement lines • ditches or interceptors • banks or steep slopes • fills • driveways • existing sewage systems • underground utilities • soil test pits
<p>drainage course</p>	<p>slope direction</p>	<p>Test Pit 1 <input type="checkbox"/></p>	<p>Test Pit 2 <input type="checkbox"/></p>										

Note: Additional information is required to be submitted separately for the system design detail.

Calgary	25, 2015 – 32 Avenue NE	T2E 6Z3	Ph: 403.717.2344	Toll Free Ph: 1.888.717.2344	Fax: 403.717.2340	Toll Free Fax: 1.888.717.2340
Edmonton	14613 – 134 Avenue	T5L 4S9	Ph: 780.489.4777	Toll Free Ph: 1.866.999.4777	Fax: 780.489.4711	Toll Free Fax: 1.866.900.4711
Red Deer	3, 6264 – 67A Street	T4P 3E8	Ph: 403.358.5545	Toll Free Ph: 1.888.358.5545	Fax: 403.358.5085	Toll Free Fax: 1.866.358.5085
Lethbridge	422 North Mayor Magrath Drive	T1H 6H7	Ph: 403.320.0734	Toll Free Ph: 1.877.320.0734	Fax: 403.320.9969	
Lloydminster	Unit 2, 1724 – 50 Avenue	T9V 0Y1	Ph: 780.870.9020		Fax: 780.870.9036	



Permit Number: _____

Name: _____

Date: _____

Alberta Private Sewage Treatment System Soil Profile Log Form

Owner Name or Job ID											
Legal Land Location								Test pit			
LSD – ¼	Sec	Twp	Rg.	Mer.	Lot	Block	Plan	Easting		Northing	
Vegetation Notes:						Overall Site Slope %					
						Slope position of test pit					

Test Hole No.	Soil Subgroup	Parent Material	Drainage	Depth of Lab (sample #1)	Depth of Lab (sample #2)

Horizon	Depth (cm) (in)	Texture	Lab or HT	Color	Gleying	Mottling	Structure	Grade	Consistence	Moisture	%Coarse Fragment

Depth to Groundwater:	Limiting Soil Layer Characteristic, describe:
Depth to Seasonally Saturated Soil:	Depth to Limiting Soil Layer:
Limiting Topography:	Depth to Highly Permeable Layer:

Key Limiting Features on System Design:

Weather Condition Notes:

Comments (such as root depth and abundance or other pertinent observations):



Permit Number: _____

Name: _____

Date: _____

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Key Limiting Features on System Design:
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Comments (such as root depth and abundance or other pertinent observations):