

# 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): \_\_\_\_\_



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"> <li>• trees</li> <li>• floodplains</li> <li>• wells</li> <li>• waste sources</li> <li>• bedrock</li> <li>• outcrops</li> <li>• buildings</li> <li>• property lines</li> <li>• easement lines</li> <li>• ditches or interceptors</li> <li>• banks or steep slopes</li> <li>• fills</li> <li>• driveways</li> <li>• existing sewage systems</li> <li>• underground utilities</li> <li>• soil test pits</li> </ul>
drainage course 	slope direction 				Test Pit 1 <input type="checkbox"/>				Test Pit 2 <input type="checkbox"/>				

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

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):

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