



APPLICATION TO CONSTRUCT PRIVATE SEWAGE FORM

To be faxed or emailed in 7 days prior to commencing work
Completed applications can be emailed to public.health@hrha.sk.ca
Or faxed to the appropriate office as noted below:

Community Health Services Box 1300 Rosetown, Sask. S0L 2V0 Phone: 306-882-2672 Ext. 3, Option 3 Fax: 306-882-6474
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Vanessa Amy PHI Rosetown/Biggar Area (306) 882-2672 ext. 2288 Fax 882-6474,
 Ann Chan PHI- Unity/ Wilkie Area (306) 228-2666 ext. 289 Fax 228 2292,
 Kevin Kapell PHI Outlook/ Davidson Area (306) 867-8676 ext. 406 Fax 867-2069
 John Prince PHI Kindersley/Eston Area (306) 463-1000 ext. 235 Fax 463-463-4550
 Jim Webster Senior PHI (306) 948 3323 ext. 269 Fax 948-2011

In compliance with the provisions of The Private Sewage Works Regulations application is hereby made for permission to: Construct Reconstruct Connect the private works system on the premise or property of:

Location of Installation City, Town or Village		Street	
Lot		Block	
Plan		Range	
R.M. #	Section	Township	West of Meridian
Sewage Works Installer		Address	Certificate of Status # _____
		Phone #	<input type="checkbox"/> Journeyman <input type="checkbox"/> Other _____
Permit Applicant		Address	Signature
		Phone #	
Property Owner		Mailing Address:	

PRIVATE SEWAGE WORKS

A. Expected Daily Sewage Volume (Litres/gallons) _____ # of Bedrooms _____

B. Soil Classification: (attach laboratory test results showing soil texture classification)
 Sand Loam Silt Clay Sandy/Loam Other _____

C. Depth to Water Table if less than 3 m from ground surface _____m

D. Septic Tank Holding Tank Size _____gal/litres. Concrete Fiberglass Plastic

E. Disposal Systems: Lagoon (storage capacity) _____ft³/m³ Jet Type Disposal
 Absorption Field Gravity Flow Chamber System Pressure Chamber System
 Chamber/Absorption Field System – lateral # _____ trench width _____ trench length _____ (Size) _____ft²/m²
 Sewage Mound Type I – width _____ length _____ (size) _____ft²/m²
 Sewage Mound Type II – width _____ length _____ (size) _____ft²/m²

F. Parcel Size _____ ha/acres

G. **Detailed Site Plan to be provided on reverse side of public health officer copy**

PERMIT FEES (GST is included in the fees indicated below)

Private Sewage Works (Permit fee is \$30.00) Permit Fee \$ _____

Please make your cheque payable to: Heartland Health Region..... TOTAL FEE \$ _____

- NOTE: A separate permit must be obtained for plumbing works. The permit fee calculated for the plumbing system based on # of fixtures within the dwelling..

No portion of the Plumbing and/or Private Sewage Works is to be covered over without an Inspection.

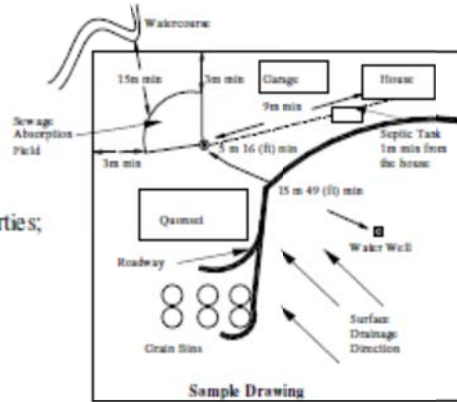
OFFICE USE ONLY	
Comments: _____	
Sewage Fees _____	Permit # issued: _____
Total Fees Received _____	Cash <input type="checkbox"/> Cheque <input type="checkbox"/> # _____

SITE PLAN DIAGRAM

DETAILS TO BE INCLUDED:

1. Property: size (hectares/acres); dimensions, boundaries
2. Location and distances of the tank and/or private sewage works from:
 - a) all water sources on that property or adjoining properties;
 - b) all buildings on that property or occupied dwelling on adjoining properties;
 - c) all water courses/sources within .5 kilometer;
 - d) all boundaries of that property.
3. Surface drainage direction.

**NOTE: UNLESS EXEMPTED BY THE LOCAL AUTHORITY A PERCOLATION TEST WILL BE REQUIRED.
CONTACT YOUR LOCAL PUBLIC HEALTH OFFICER.**



↑ North

DIAGRAM

