



## SEWAGE SYSTEM DESIGN SUMMARY

**THIS SUMMARY MUST BE ACCOMPANIED BY THE COMPLETED APPLICATION FOR A PERMIT TO CONSTRUCT OR DEMOLISH**

OWNER		INSTALLER	
ADDRESS		ADDRESS	
POSTAL CODE		POSTAL CODE	LICENSE
TEL.	FAX	TEL.	FAX

PROVIDE THE FOLLOWING PROPERTY INFORMATION	
LOT:	SUBLOT:
CONCESSION	PLAN:
REG. PLAN:	
STREET:	
ROLL NO.:	

WILL MORE THAN ONE SEWAGE SYSTEM BE USED?  YES  NO

SEWAGE SYSTEMS DESIGN INFORMATION			
TOTAL NUMBER OF BEDROOMS ON THE PROPERTY:			
BASEMENT	_____ ft <sup>2</sup>	1 <sup>st</sup> FLOOR	_____ ft <sup>2</sup>
		2 <sup>nd</sup> FLOOR	_____ ft <sup>2</sup>
TOTAL FINISHED FLOOR AREA		_____ ft <sup>2</sup>	OTHER _____ ft <sup>2</sup>
DESCRIPTION	#	x	FIXTURE UNITS = TOTAL
2 - Piece Bath	_____	x	5.0 _____
3 - Piece Bath	_____	x	6.0 _____
4 - Piece Bath	_____	x	7.0 _____
Kitchen Sink	_____	x	1.5 _____
Watercloset	_____	x	4.0 _____
Dishwasher	_____	x	1.5 _____
Washing Machine	_____	x	1.5 _____
Shower or Vanity Sink	_____	x	1.5 _____
Bidet	_____	x	1.0 _____
Garbage Grinder	_____	x	1.5 _____
Floor Drain	_____	x	2.0 _____
Other Fixtures	_____	x	1.5 _____
TOTAL FIXTURE UNITS: _____			
TOTAL DAILY DESIGN FLOW RATE "Q" =			(L/Day)
PERCOLATION TIME OF EXISTING SOIL "T" =			(MIN/CM)
TYPE OF EXISTING SOIL			
SLOPE RATIO		VEGETATION	
DEPTH TO BEDROCK/HARDPAN			
DEPTH TO HIGH WATER TABLE			
EXISTING SOIL USED FOR LEACHING BED		YES ' NO '	
IMPORTED SOIL TO BE USED		YES ' NO '	
DESCRIBE MANTLE			
DEPTH OF MANTLE		"T" TIME OF MANTLE =	

A SITE PLAN WHICH LOCATES ALL FEATURES & STRUCTURES MUST BE PROVIDED

TANK / TREATMENT UNIT	
NEW CSA SEPTIC TANK <input type="checkbox"/>	USE EXISTING TANK <input type="checkbox"/>
SIZE OF FIRST TANK:	
SIZE OF SECOND TANK (IF APPLICABLE):	
PUMPING CHAMBER <input type="checkbox"/>	DOSING TANK <input type="checkbox"/>

<input type="checkbox"/> CLASS 4 LEACHING BED SYSTEM WITH <u>ABSORPTION TRENCH</u>		
DUG INTO EXISTING SOIL ' _____	<u>OR</u>	FILL BASED ' _____
HEADER ' _____	<u>OR</u>	DISTRIBUTION BOX ' _____
TOTAL LENGTH OF TILE		(ft)
# OF RUNS OF TILE	LENGTH OF RUN	(ft)

<input type="checkbox"/> CLASS 4 LEACHING BED SYSTEM WITH <u>FILTER BED</u>		
DUG INTO EXISTING SOIL ' _____	<u>OR</u>	FILL BASED ' _____
HEADER ' _____	<u>OR</u>	DISTRIBUTION BOX ' _____
TOTAL LENGTH OF TILE		(ft)
# OF RUNS OF TILE	LENGTH OF RUN	(ft)
PROOF OR APPROVED FILTER MATERIAL MUST BE PROVIDED (FILTER SAND GRAPH)		

' CLASS 1 PRIVY ' COMPOSTING ' CHEMICAL ' ELECTRICAL ' OTHER	<i>Provide Construction Details</i>
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' CLASS 2 GREYWATER SYSTEM	<i>Provide Construction Details</i>
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' CLASS 3 CESSPOOL	<i>Provide Construction Details</i>
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' CLASS 5 HOLDING TANK		
STEEL ' POLYETHYLENE ' SIZE		
ALARMS: AUDIO ' _____	<u>AND</u>	VISUAL ' _____
PUMP OUT CONTRACT MUST BE PROVIDED		

' OTHER SEPTIC SYSTEM
DESCRIBE:

FOR ANY OF THE ABOVE IS A SEWAGE EJECTION PUMP USED? YES ' NO '

PRIOR TO CONSTRUCTION, ARRANGE FOR AN INSPECTION OF TEST PIT AND APPROVAL OF THE PROPOSED SITE AND SEWAGE SYSTEM

COMPLETED BY: \_\_\_\_\_ DATE: \_\_\_\_\_

**NO WORK SHALL COMMENCE UNTIL A PERMIT HAS BEEN ISSUED.**