

Please submit all permit applications to [south@inspectionsgroup.com](mailto:south@inspectionsgroup.com) for review and processing.

### PRIVATE SEWAGE PERMIT APPLICATION FORM

Development Permit Number: \_\_\_\_\_ Estimated Project Completion Date: \_\_\_\_\_  
 New Home Warranty Number (if applicable): \_\_\_\_\_ Project Value (labour and material): \$ \_\_\_\_\_  
 Applicant Type:  Owner  Contractor Work:  has not started  is in progress  is complete

**OWNER / APPLICANT:** \_\_\_\_\_ Mailing Address: \_\_\_\_\_  
 City: \_\_\_\_\_ Prov: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Cell: \_\_\_\_\_ Email: \_\_\_\_\_

**CONTRACTOR:** \_\_\_\_\_ Mailing Address: \_\_\_\_\_  
 City: \_\_\_\_\_ Prov: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Cell: \_\_\_\_\_ Email: \_\_\_\_\_

**PROJECT LOCATION:**  
 Municipality: \_\_\_\_\_ Subdivision / Hamlet Name: \_\_\_\_\_  
 Street Address: \_\_\_\_\_  
 Legal Land Description: LSD: \_\_\_\_\_ Part of: \_\_\_\_\_ Section: \_\_\_\_\_ Township: \_\_\_\_\_ Range: \_\_\_\_\_ West of: \_\_\_\_\_  
 Lot: \_\_\_\_\_ Block: \_\_\_\_\_ Plan: \_\_\_\_\_ Tax Roll Number: \_\_\_\_\_  
 Directions: \_\_\_\_\_

**BUILDING USE:**  
 Residential  
 # of bedrooms \_\_\_\_\_  
 Commercial  
 # of employees \_\_\_\_\_  
 Industrial  
 Institutional  
 Agricultural  
 Work Camp  
 # of workers \_\_\_\_\_  
 Other (specify) \_\_\_\_\_

**TYPE OF WORK:**  
 New Installation  
 Alteration of Existing System  
 Expected Peak Volume \_\_\_\_\_  
 m<sup>3</sup>  litres  imperial gallons / day

**INITIAL COMPONENT:**  
 Holding Tank  
 Septic Tank  
 Packaged Treatment Plant  
 Sand Filter  
 Settling Tank  
 Effluent Tank  
 Lift Station  
 Other (specify) \_\_\_\_\_  
 CSA Certificate # \_\_\_\_\_

**SOIL BASED TREATMENT:**  
 Treatment Field  
 Chamber System Treatment Field  
 Treatment Mound  
 Sub-Surface Drip Dispersal  
 LFH At-Grade  
 Open Discharge  
 Lagoon  
 Privy  
 Enhanced Surface Discharge  
 Other (specify) \_\_\_\_\_

**DESCRIPTION OF WORK:** \_\_\_\_\_  
 \_\_\_\_\_

Certified Installer's Name (print) \_\_\_\_\_ Certified Installer's Certificate Number \_\_\_\_\_ Certified Installer's Signature \_\_\_\_\_  
 Homeowner's Signature (homeowner permit only) \_\_\_\_\_  
I hereby declare that I am the owner of the premises where the work will be conducted and/or currently reside or intend to reside on the property. I assume responsibility for ensuring compliance with the applicable Act and Regulations.

**TIGI OFFICE USE ONLY**

**PAYMENT TYPE:**  
 Cheque  Mastercard  Visa  AMEX  Interac  e-Transfer  Invoice  
**Permit Fee:** \$ \_\_\_\_\_  
**+ SCC Levy\*:** \$ \_\_\_\_\_  
**= Total Cost:** \$ \_\_\_\_\_ **Receipt #:** \_\_\_\_\_

**APPLICATION DETAILS:**  
**Application Date:** \_\_\_\_\_  
**Permit Number:** \_\_\_\_\_  
**Agency File Number:** \_\_\_\_\_

\* \$4.50 or 4% of the permit fee maximum \$560.00