

# Private Sewage Permit Application

In compliance with the provisions of *The Private Sewage Works Regulations* application is hereby made for permission to establish, install, construct, extend, renovate, alter or repair a private sewage works on the premises or property of:

Physical Location	Lot /Block/Plan or Street Address			Subdivision Name			The private sewage works is or will be connected to a communal water system <input type="checkbox"/> Yes <input type="checkbox"/> No		
	RM # - OR - Municipality name	Quarter (rural only)	Section (rural only)	Township (rural only)	Range (rural only)	Meridian (only if rural property) West of ____ Meridian			

Contractor	Sewage Contractor				Email Address (if not applicable mark n/a)				
	Installer Address			Town/City	Postal Code	Phone #	Fax #	Cell #	

Property Owner	Property Owner Name			Phone #	Fax #	Cell #	
	Owner Mailing Address			City		Postal Code	

## Private Sewage Works Scope of Work

- A. Expected Daily Sewage Volume (Litres) \_\_\_\_\_ # of Bedrooms \_\_\_\_\_ Garborator  Yes  No
- B. Soil classification (attach laboratory test results showing soil texture classification)  
 Clay Loam or  Silt or  Sandy Clay Loam or  Silt Loam or  Loam or  Sandy Loam or  Loamy Sand or  Not Suitable
- C. Initial Treatment  
 Septic Tank (Section 6) or  Holding Tank (Section 5) Total Size \_\_\_\_\_ gal/litres Working Capacity \_\_\_\_\_ gal/litres  
 Package Treatment Plant Manufacturer \_\_\_\_\_
- D. Final Treatment and Disposal System  
 *Jet Type Disposal* (Section 10) Part B is not required  
 *Absorption System* (Section 8)  *Chamber System* (Section 7)  
 Gravity include completed appendix 3; or  Gravity include completed appendix 3; or  
 Pressure include completed appendices 3 and 17  Pressure include completed appendix 3A  
 *Sewage Mound* (Section 9)  *Lagoon* (Section 11) Volume \_\_\_\_\_ m<sup>3</sup> and Surface area \_\_\_\_\_ m<sup>2</sup>  
 Type I include completed appendix 7A; or  *Not* intended for discharge; or  
 Type II include completed appendices 7 and 17  Intended for discharge
- E. Depth to water table, if less than 3 meters from ground surface \_\_\_\_\_ meters (feet)
- F. Parcel Size \_\_\_\_\_ ha/acres This parcel is one of \_\_\_\_\_ subdivided parcels on this quarter section.
- G. Distance to nearest municipality  greater than 1 km  less than 1 km specify distance \_\_\_\_\_ km
- H. Detailed Site Plan to be provided on back

**The undersigned hereby applies for a Permit to build in accordance with this application; all by-laws and regulations applicable thereto and that no part of the works shall be covered until permission is granted by the Saskatchewan Health Authority.**

Applicant Name (print)	Applicant Signature	Date
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**Permit Fee** (must be submitted at time of application)      \$30

Note: If the permit is not obtained prior to work commencing, the fee is doubled

**Plumbing Permit Fee:** \$ \_\_\_\_\_

Cheque/ money order/credit card information included with permit application

CREDIT CARD NUMBER:		Name on Card:
Expiry Date:	CVC#:	Signature:

All fees will be receipted upon issuance of the permit

Mail application and payment to: Public Health Inspection, Box 2003, Weyburn SK, S4H 2Z9  
 or email: [pubhealthinspection@schr.sk.ca](mailto:pubhealthinspection@schr.sk.ca)

## Sewage Disposal Permit Issuance

**Permit Application Status:**  All information received;  Reviewed;

**Permission is**  granted **OR**  NOT granted **OR**  Conditionally granted to construct the works indicated in this application

Permit issued; Permit # \_\_\_\_\_

FOR OFFICE USE ONLY					
Date Rec:	Received by:	Money included: Y N	Refunded: Y N	Voided: Y N	H L

