

Private Sewage System Permit Application

Permit Applicant: Owner Contractor
Application Date (mm/dd/yyyy): _____ Estimated Start Date (mm/dd/yyyy): _____
 Development Permit No. (if applicable): _____ Estimated Completion Date (mm/dd/yyyy): _____
 Building Permit No. (if applicable): _____ **Value of Work** (labour & materials): _____

Owner Name (printed): _____
 Mailing Address: _____ City/Town/Village: _____ Province: _____ Postal Code: _____
 *Email: _____ Owners Phone #: _____ Fax #: _____

Contracting Company Name (printed): _____ **Contact Name** (printed): _____
 Mailing Address: _____ City/Town/Village: _____ Province: _____ Postal Code: _____
 *Email: _____ Owners Phone #: _____ Fax #: _____

Project Location
 Municipality: _____ Subdivision/ Hamlet Name: _____ Tax Roll No.: _____
 Street/ Rural Address: _____ Unit: _____
 * **Legal land description is required**
 Lot: _____ Block: _____ Plan: _____ LSD: _____ Quarter: _____ Section: _____ Township: _____ Range: _____ West of: _____
 Directions: _____

Description of Work (please provide a **complete** and **detailed** description of the work to be completed including all applicable drawings/ documents):

Work has not started Work is in progress Work is complete
WORK SHOULD NOT COMMENCE BEFORE PERMIT IS ISSUED / WORK MUST BE INSPECTED BEFORE COVERING
 Submit with application: Completed Site Evaluation and System Design Report as per the current Alberta Private Sewage Systems Standard of Practice

TYPE OF WORK	INITIAL COMPONENT	SOIL BASED TREATMENT SUMMARY
Please only select applicable item(s)	Please only select applicable item(s)	Please only select applicable item(s)
<input type="checkbox"/> New Installation <input type="checkbox"/> Alteration of Existing System <input type="checkbox"/> Residential # of bedrooms: _____ <input type="checkbox"/> Commercial # of seats (employees): _____ <input type="checkbox"/> Industrial <input type="checkbox"/> Institutional <input type="checkbox"/> Farm Building <input type="checkbox"/> Work Camp # of beds: _____ Variance No.: _____ Variance Exp. Date: _____ Expected Peak Volume: _____ <input type="checkbox"/> L/day <input type="checkbox"/> Imp. Gal/day <input type="checkbox"/> Meters ³ /day (not to exceed 25 m ³ /day)	<input type="checkbox"/> Holding Tank Model No.: _____ Capacity: _____ CSA Cert No.: _____ <input type="checkbox"/> Septic Tank Model No.: _____ Capacity: _____ CSA Cert No.: _____ <input type="checkbox"/> Packaged Sewer Treatment Plant <input type="checkbox"/> Sand Filter <input type="checkbox"/> Effluent Tank <input type="checkbox"/> Settling Tank <input type="checkbox"/> Lift Station	<input type="checkbox"/> Treatment Field <input type="checkbox"/> LFH At-Grade <input type="checkbox"/> Chamber System Treatment Field <input type="checkbox"/> Open Discharge <input type="checkbox"/> Treatment Mound <input type="checkbox"/> Lagoon <input type="checkbox"/> Sub-surface Drip Dispersal <input type="checkbox"/> Privy (with holding tank) <input type="checkbox"/> Enhanced Surface Discharge Depth to Restrictive Layer: _____ <input type="checkbox"/> Meters <input type="checkbox"/> Feet <input type="checkbox"/> Inches Depth to Limiting Layer: _____ <input type="checkbox"/> Meters <input type="checkbox"/> Feet <input type="checkbox"/> Inches Limiting Soil Characteristics: Texture: _____ Structure: _____ Grade: _____ Soil Infiltration Area Required: _____ <input type="checkbox"/> Meters ² <input type="checkbox"/> Feet ² Soil Effluent Loading Rate: _____ <input type="checkbox"/> L/day <input type="checkbox"/> Imp. Gal/day Linear Loading Rate: _____ <input type="checkbox"/> L/day <input type="checkbox"/> Imp. Gal/day

FOIP Notification: Personal information collected on this form is collected under the authority of section 33(c) of the Alberta Freedom of Information and Protection of Privacy Act. It is used for processing permit applications, issuing permits, safety codes compliance monitoring, verification, and program evaluation. The name of the permit holder and nature of the permit may be included on reports provided to a municipality or made available to the public as required or allowed by legislation. Questions about this collection may be directed to ASCA Coordinators at 1-888-413-0099 or at Suite 500, 10405 Jasper Avenue, Edmonton, AB T5J 3N4.

Certified Installer's Name (please print) _____ Certification No. _____ Certified Installer's Signature _____

Homeowner's Signature (homeowner permit only) **Homeowner Declaration:** I hereby declare I am the owner of the premises in which the work will be conducted and reside or will reside on the property. I am doing the work myself, and assume responsibility for compliance with the applicable Act and Regulations.

OFFICE USE ONLY

<p>Other Permits Required <input type="checkbox"/> Building <input type="checkbox"/> Electrical <input type="checkbox"/> Gas <input type="checkbox"/> Plumbing <input type="checkbox"/> Not Applicable</p> <p>Permit Fee: \$ _____ SCC Levy: \$ _____ (\$4.50 or 4% of the permit fee maximum \$560.00) Travel Fee: \$ _____</p> <p>Total Cost: \$ _____ Receipt #: _____ <input type="checkbox"/> Invoiced <input type="checkbox"/> Cash <input type="checkbox"/> Cheque <input type="checkbox"/> Debit <input type="checkbox"/> Credit Card <input type="checkbox"/> Visa <input type="checkbox"/> MC (attach signed credit card authorization form)</p>	<p>[Received Date Stamp]</p> <p>eSITE Permit No.: _____ Agency File No.: _____</p>
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A COMPLETE SITE EVALUATION REPORT, AS PER THE 2015 ALBERTA PRIVATE SEWAGE SYSTEMS STANDARD OF PRACTICE (SOP) PART 7 SITE EVALUATION, IS REQUIRED WITH THE PERMIT APPLICATION. THE FOLLOWING DOCUMENTS ARE TO BE INCLUDED WITH YOUR COMPLETE SITE EVALUATION REPORT.

TREATMENT FIELD, MOUND, OR LFH AT-GRADE SYSTEMS

- Wastewater strength projected for the development.
- Peak flow volume calculations for the development including confirmation plumbing fixture unit total is not exceeded.
- Site plan – as per current SOP Section 7.1 Site Characteristics and Evaluation Procedures including placement of system with setbacks noted for property lines, buildings, water sources/courses, description of surface features including slope and landscape, location of at least two (2) soil profile investigation locations in the area of the soil-based treatment system, etc.
- The characteristics of each soil profile investigated shall be described using Canadian System of Soil Classification nomenclature and includes complete site specific soil profile logs for at least two (2) locations, soil sample results of the most limiting condition, GPS coordinates of each soil profile with permanent benchmark, depth of each horizon identified, soil colour, soil texture, structure and grade, depth to most limiting condition, restrictive layer (if applicable), etc.
- Description of treatment system including a system diagram, piping to tank details, initial treatment (septic tank/ treatment plant), piping to and throughout final soil treatment component.
- Soil based treatment system design calculations, including pressure distribution system – if applicable.
- Tank certification information – CAN/CSA-B66 certificate (confirmed by or on final inspection).
- Package sewage treatment plant – treatment capacity, equipment structural requirements and certification (if applicable).
- Pump, if required by design. Manufacturer and pump curve to ensure flow capacity (confirmed by or on final inspection)
- High level alarm (reference made in design and confirmed by or on final inspection).
- Filter (reference made in design and confirmed by or on final inspection).

HOLDING TANK

- Expected wastewater volume/day including tank storage capacity, bedroom count – current and proposed.
- Site plan showing placement of system with setbacks noted for property, buildings and water source.
- Tank certification information – CAN/CSA-B66 certificate (confirmed by or on final inspection).
- High level alarm (reference made in design and confirmed by or on final inspection).

OPEN DISCHARGE SYSTEM

- Peak flow volume calculations for the development including confirmation plumbing fixture unit total is not exceeded.
- Site plan – as per current SOP Section 7.1 Site Characteristics and Evaluation Procedures including placement of system with setbacks noted for property lines, buildings, water sources/courses, description of surface features including slope and landscape, location of at least one (1) soil profile investigation location in the area of the soil-based treatment system, etc.
- The characteristics of each soil profile investigated shall be described using Canadian System of Soil Classification nomenclature and includes complete site specific soil profile logs for at least one (1) location, soil sample results of the most limiting condition, GPS coordinates of each soil profile with permanent benchmark, depth of each horizon identified, soil colour, soil texture, structure and grade, depth to most limiting condition, restrictive layer (if applicable), etc.
- Description of treatment system including a system diagram, piping to tank details, initial treatment (septic tank/treatment plant), piping to and throughout final soil treatment component.
- Tank certification information – CAN/CSA CSA-B66 certificate (confirmed by or on final inspection).
- Pump, if required by design. Manufacturer and pump curve to ensure flow capacity (confirmed by or on final inspection).
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Permit Number: _____

Name: _____

Date: _____

PERMITS & INSPECTIONS

Private Sewage System Site Evaluation Diagram

Legal Description: _____

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Show the proposed location of the onsite sewage system and indicate the distances from the following:

- trees
- floodplains
- wells
- waste sources
- bedrock
- outcrops
- buildings
- property lines
- easement lines
- ditches or interceptors
- banks or steep slopes
- fills
- driveways
- existing sewage systems
- underground utilities
- soil test pits

drainage course

slope direction

Test Pit 1

Test Pit 2

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

"Superior Safety Codes' mission is to provide all individuals ethical and timely service through an absolute commitment to integrity"

Edmonton	14535 – 118 Avenue	T5L 2M7	Ph: 780.489.4777	Toll Free: 1.866.999.4777	Fax: 780.489.4711	Toll Free: 1.866.900.4711
Calgary	25, 2015 – 32 Avenue NE	T2E 6Z3	Ph: 403.717.2344	Toll Free: 1.888.717.2344	Fax: 403.717.2340	Toll Free: 1.888.717.2340
Lethbridge	422 North Mayor Magrath Dr.	T1H 6H7	Ph: 403.320.0734	Toll Free: 1.877.320.0734	Fax: 403.320.9989	
Lloydminster	Unit 2, 1724 – 50 Avenue	T9V 2S5	Ph: 780.870.9020		Fax: 780.870.9038	
Red Deer	3, 6264 – 67A Street	T4P 3E8	Ph: 403.358.5545	Toll Free: 1.888.358.5545	Fax: 403.358.5085	Toll Free: 1.866.358.5085

Permit Number: _____

Name: _____

Date: _____

Alberta Private Sewage Treatment System Soil Profile Log Form

Owner Name or Job ID		Legal Land Location						Test pit	
LSD - 1/4	Sec	Twp	Rq.	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): _____