

PETTIS COUNTY ON-SITE WASTEWATER DISPOSAL SYSTEM CONSTRUCTION PERMIT APPLICATION and PERMIT FOR CONSTRUCTION Page 1 of ____

Date Submitted: _____ Parcel No.: _____ GPS _____
 Owner: _____ Phone Number: _____
 Site Address: _____
 Installer: _____ Phone No#: _____ Mo. Reg. No.#: _____
 Soil Morphologist: _____ On-site Evaluator No.#: _____

Residence No.# of Bed Rooms _____ Food Service Other _____
 Water: Community Non Community Private Shared _____ No. of homes Other _____
 Daily Flow _____ Gal. Soil Loading Rate _____ GPD/SqFt Percent Slope _____% Depth of Soil to Limiting Layer _____ inches
 System proposed: Conventional Lagoon Advanced Experimental New Replacement Major Modification
 Tank: Type _____ 1st Tank Size _____ Gal 2nd Tank Size _____ Gal Pump Tank _____ Gal
 Laterals: Type _____ Width _____ ft, Length _____ ft, Depth _____ inches
 Lagoon: Depth _____ ft Square Length _____ ft, Width _____ ft Round Diameter _____ ft
 Variance Requested: _____
 Variance: Approved Disapproved / Reason: _____
 Directions to Property (Include Road Number and Subdivision): _____

Diagram of Proposed System, include the Following Information:

- ___ Diagram System Proposed
- ___ Measurements in Feet
- ___ Underground Utilities
- ___ Property Lines
- ___ Topography
- ___ Set Backs
- ___ Easements
- ___ Buildings
- ___ Slope
- ___ Roads
- ___ Well

Certification of Information: I certify that the information supplied by me contained in this permit is truthful and correct.

Owner's Signature / Date _____

Certification of Plans: I certify that the construction of this Onsite Wastewater Disposal System will be completed in accordance with the approved plans, state laws and local ordinances.

Installer's Signature/ Date _____

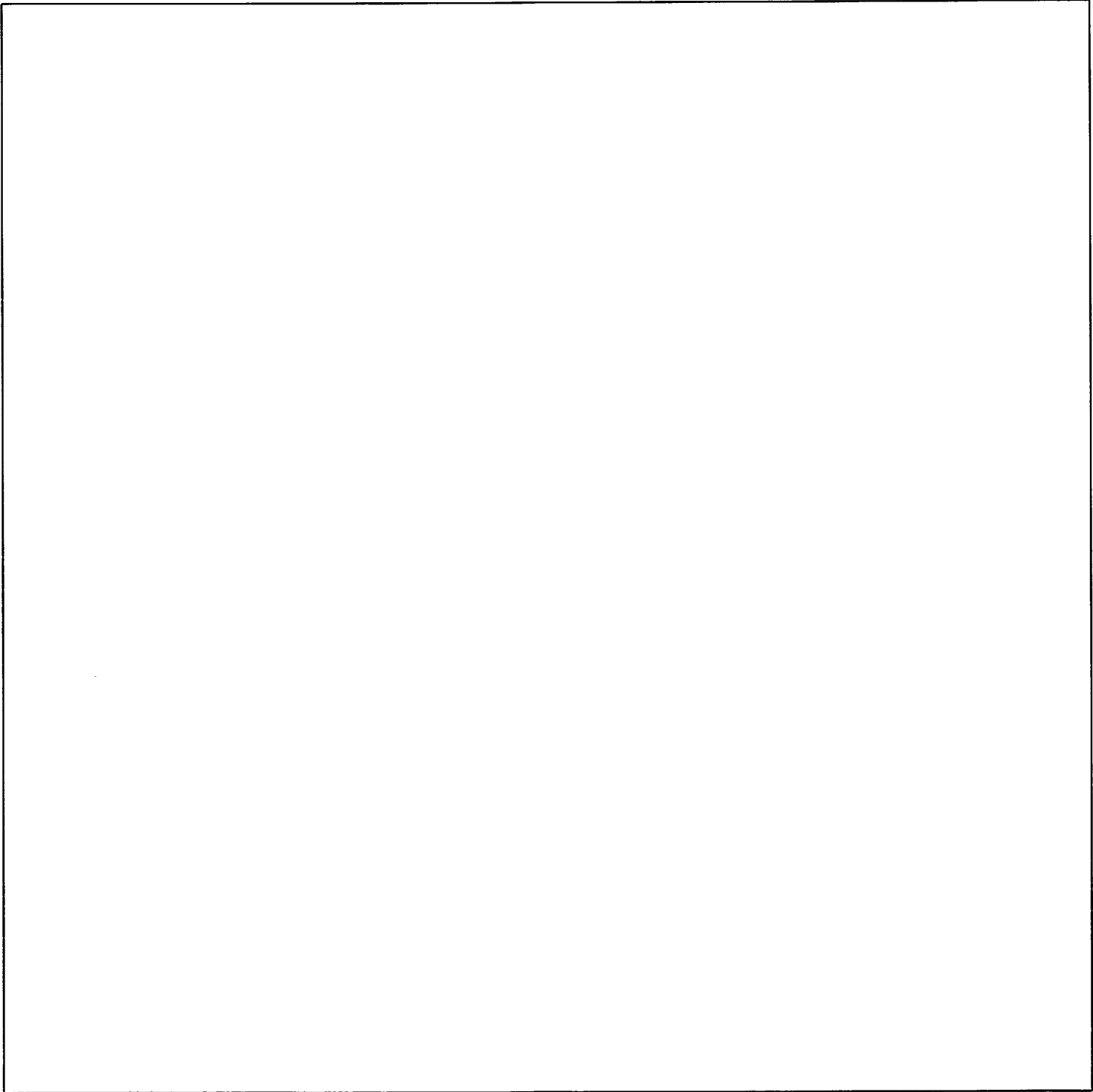
Construction Permit: The Onsite Wastewater Disposal System described in this permit is hereby approved to begin construction, subject to final approval upon completion.

Environmental Public Health Specialist's Signature / Date _____

Distribution: White – Owner Yellow – Environmental Public Health Pink - Installer

**PETTIS COUNTY ON-SITE WASTEWATER DISPOSAL SYSTEM CONSTRUCTION PERMIT
APPLICATION and PERMIT FOR CONSTRUCTION Page 2 of ____**

Date Submitted: _____ Owner: _____ Permit # _____
Address _____



Owner's Signature/Date _____
Installer's Signature/ Date _____
Environmental Public Health Specialist's Signature / Date _____