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Healthy People,

**Healthy Communities** 

Athabasca Health Authority

Keewatin Yatthé Health Region

Mamawetan Churchill River

Health Region

## **Rural Plumbing/Sewage Disposal Permit Application**

	· ·		=		lication is hereby made	-	
Construct $\square$	Reconstruct $\square$	Extend	☐ Connect ☐	the: plumbir	ng system   private se	∍wage works □	
On the premises or property of:  Location of Installation				Address			
City, Town or Village:							
Lot			Block		Plan		
R.M.#	Section	Townshi	р	Range	West of	Meridian	
· ·		Address Phone#		Certificate of Status #			
				☐ Journeyman ☐ Other			
Permit Applicant		Address		Signature			
Property Owner Phone#				Mailing Address	Mailing Address		
Plumbing System – Fixtures to be Installed				3 11 11			
Plumbing Syster	n – Fixtures to be	e Installed					
Kitchen SinksShower StallsLaundry TubsLavatoriesBath TubsClothes WasherWater ClosetsFloor Drains (No Charge)Other Fixtures							
No part of the plumbing system or private sewage works shall be covered until permission is granted b the Local Authority.							
Private Sewag	ge Works						
A. Expected D	aily Sewage V	olume (L	itres) =	# of Bedrooms			
B. Soil Classification: Sand $\square$ Loam $\square$ Silt $\square$ Clay $\square$ Sandy/Loan $\square$							
C. Percolation Test minutes per 25 mm							
D. Depth to Water Table if less than 3m from ground surfacem							
E. Septic Tank	Holding	Γank □	Size	gals/litres.			
Gravity Flow # of Chamb Sewage Mo	w Chamber Sys er Units	stem  se)	Pressure Chamb Size of each Cam m³ of clean gr	oer System $\Box$ Ch	m² Other _ amber System (size) _m² age Mound Type II (si	m²	
				public health office	er copy anted by the Local Au	thority.	
Permit Fee  Total Number of Fixtures  Private Sewage Works  Connection to Communal Sewage Works or Communal Waterworks  Fee \$  Fee \$  Total \$							