



THE MUNICIPALITY OF WEST GREY

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DATE RECEIVED _____ WEST GREY FILE NO. _____
ROLL NO _____ WG RECEIPT NO _____
PLAN NO _____ EHS FILE NO _____

APPLICATION FOR A BUILDING PERMIT FOR A SEWAGE SYSTEM

OWNER _____

MAILING ADDRESS _____

POSTAL CODE _____ TEL. NO. _____ CIVIC NO. _____

LICENCED INSTALLER _____ LICENCE NO. _____

ADDRESS _____

POSTAL CODE _____ TEL. NO. _____

LOCATION OF PROPOSED SYSTEM: Lot _____ Conc. _____ Civic No. _____

Directions to site: _____

Propose to Install/Alter a Class _____ Sewage System to serve _____ (Building Type)

SYSTEM REQUIREMENTS [] NEW INSTALLATION [] REPLACEMENT [] ALTERATION [] REPAIR

- [] INGROUND [] ENGINEER INSPECTIONS TANK CAPACITY _____
[] PARTIALLY RAISED [] BASE CUT INSPECTION TILE/CHAMBER MEAS _____
[] FULLY RAISED [] MANTLE REQUIRED [] ALARM FILL DEPTH _____
[] FILTER BED [] PUMP & CHAMBER [] SIPHON FILL AREA _____
[] ACCESS RISERS [] CHAMBER SYSTEM [] DISTRIBUTION BOX SEWAGE ENVELOPE _____
[] OUTLET FILTER [] PERFORATED PVC PIPE [] DOUBLE HEADER FIELD TILE? [] YES [] NO

OTHER REQUIREMENTS _____

Table with columns: STATE NUMBER OF: (Description, #, x F/U, =), WATER SUPPLY: (Proposed, Existing), and Subtotal Fixture Units. Includes rows for Water Closets, Dishwashers, Automatic Washers, Grease Interceptors, Garbage Grinders, Whirlpools/Spas, Bidets, Sinks, Shower Tubs, and Living Area.

Conditions in sewage system area: Soil type _____ Depth to bedrock/hardpan _____

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PERCOLATION TEST and or SOIL ANALYSIS

Performed by _____ Date _____

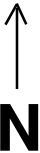
Starting Time	Finishing Time	Drop in Water Level	Percolation Rate Min./cm (0.3937 inch)
1.			
2.			
3.			

Percolation Rate (average) _____ minute(s) per cm (0.3937 inch).

Percolation Test (depth below grade) _____

LOT DIAGRAM and SEWAGE SYSTEM PLAN:

- Outline of property with all dimensions. On large parcels include area around building site only.
- Locations and dimensions of proposed and existing buildings, swimming pools, ponds, lakes, and rivers and any other pertinent topographical features (swamps, steep slopes, etc.).
- Details of proposed sewage system including size, design and location of tank and leaching bed components. Include "Site Plan" if contained in the original agreement or if registered on title.
- Location of any underground service (hydro, water, foundation footing drain, etc.).
- Location and type of all existing and proposed water supplies including neighbouring supplies.
- Sieve analysis may be required.



Site Plan required. Use additional paper if necessary!
As-Built Drawing required prior to installation inspection approval letter.

SIGNED _____
(Owner or Installer)

DATE _____

**PLEASE ENCLOSE THE PRESCRIBED FEE OF
\$500.00 MADE PAYABLE TO:
THE MUNICIPALITY OF WEST GREY**

**Environmental Health Officer
Les MacKinnon
305507 South Line A, RR 3
Priceville, Ontario N0C 1K0**

Ph: 519-369-1944, Cell 519 375-2837

SIGNED _____
(Inspector/Environmental Health Officer)

DATE APPROVED _____

ROLL NO. _____

WG FILE NO. _____

EHS FILE NO _____

Schedule 2: Sewage System Installer Information

A. Project Information

Building number, street name _____ Unit number _____ Lot/con. _____

Municipality _____ Postal code _____ Plan number/ other description _____

B. Sewage system installer

Is the installer of the sewage system engaged in the business of constructing on-site, installing, repairing, servicing, cleaning or emptying sewage systems, in accordance with Building Code Article 3.3.1.1, Division C?

Yes (Continue to Section C)

No (Continue to Section E)

Installer unknown at time of application (Continue to Section E)

C. Registered installer information (where answer to B is "Yes")

Name _____ BCIN _____

Street address _____ Unit number _____ Lot/con. _____

Municipality _____ Postal code _____ Province _____ E-mail _____

Telephone number _____ Fax _____ Cell number _____

D. Qualified supervisor information (where answer to section B is "Yes")

Name of qualified supervisor(s)

Building Code Identification Number (BCIN)

E. Declaration of Applicant:

I _____ declare that:
(print name)

I am the applicant for the permit to construct the sewage system. If the installer is unknown at time of application, I shall submit a new Schedule 2 prior to construction when the installer is known;

OR

I am the holder of the permit to construct the sewage system, and am submitting a new Schedule 2 now that the installer is known.

I certify that:

1. The information contained in this schedule is true to the best of my knowledge.
2. If the owner is a corporation or partnership, I have the authority to bind the corporation or partnership.

Date

Signature of Applicant