



Alpha Precision Soil Science

SEPTIC PERMIT APPLICATION

IF THE INFORMATION IN THE APPLICATION FOR AN AOWE OR A2 PERMIT IS FALSIFIED, CHANGED, OR THE SITE IS ALTERED, THEN THE AOWE OR A2 PERMIT SHALL BECOME INVALID

APPLICANT INFORMATION

Applicant	Address	Phone
Email: _____		
Owner	Address	Phone
Email: _____		

PROPERTY INFORMATION

date originally deeded & recorded _____

Street Address	Subdivision Name	Section/Phase/Lot#
Directions to Site: _____		Lot Size _____

DEVELOPMENT INFORMATION

- ☐ New Single Family Residence
☐ Expansion of Existing System
☐ Repair to Malfunctioning Sewage Disposal System
☐ Non-Residential Type of Structure

Residential Specifications

Maximum number of bedrooms/occupants: ____/____
If expansion: Current number of bedrooms: ____
Will there be a basement? ☐ yes ☐ no
Plumbing fixtures in Basement ☐ yes ☐ no

Non-Residential Specifications:

Type of business: _____ Total Square footage of Building: _____
Maximum number of employees: _____ Maximum number of seats: _____

Are there any existing wells or springs on this property or within 100' of property? ☐ yes ☐ no

Water Supply:

☐ New well ☐ Existing Well ☐ Community Well ☐ Public Water ☐ Spring

If the answer to any question below is "yes", applicant must attach supporting documentation.

- | | |
|--|---|
| <input type="checkbox"/> yes <input type="checkbox"/> no | Does the site contain any jurisdictional wetlands? |
| <input type="checkbox"/> yes <input type="checkbox"/> no | Does the site contain any existing wastewater systems? |
| <input type="checkbox"/> yes <input type="checkbox"/> no | Is any wastewater going to be generated on the site other than domestic sewage? |
| <input type="checkbox"/> yes <input type="checkbox"/> no | Is the site subject to approval by any other public agency? |
| <input type="checkbox"/> yes <input type="checkbox"/> no | Are there any easements or right of ways on this property? |

I have read this application and certify that the information provided herein is true, complete and correct. Alpha Precision Soil Science Employees are granted right of entry to conduct necessary inspections to determine compliance with applicable laws and rules. I understand that I am solely responsible for the proper identification and labeling of all property lines and corners and making the site accessible so that a complete site evaluation can be performed.

Property owner's or owner's legal representative** signature (required)

Date

**Must provide documentation to support claim as owner's legal representative.



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SITE PLAN WORKSHEET

Place a mark (X) beside each item that has been indicated on your site plan.

- _____ - The dimensions of the property.
- _____ - The proposed location of all structures (e.g.: facility, wells, water lines, outbuildings, pools). Show the distances from the road and the side property line to all structures. Be sure and give the dimensions for all the structures. If you are unsure as to the structure size, please show the dimensions of the MAXIMUM area of the lot that you anticipate the structure will cover.
- _____ - The site you would prefer your septic system to go in.
- _____ - The preferred driveway location.
- _____ - The proposed well location.
- _____ - A north arrow or other sufficient directional indicator.
- N/A _____ - Any proposed structures or improvements to the property such as garages, workshops, pools, etc. **If there are none, circle N/A.**
- N/A _____ - The location of any existing septic tank systems and wells on your property and on the adjoining property within 100' of your property line. **If there are none, circle N/A.**
- N/A _____ - The location of any easements or rights of way on the property. **If there are none, circle N/A.**
- N/A _____ - The location of any designated wetlands on the property. **If there are none, circle N/A.**

USE THIS SPACE TO DRAW YOUR SITE PLAN: