



Town of Ponoka
5102-48 Avenue
Ponoka, AB T4J 1P7

Phone: (403) 783-4431
Fax: (403) 783-6745

Private Sewage Permit Application

Permit Label

Permit Type: Owner Contractor

eSITE Permit Number: 254254-_____

Development Permit Number: _____

Application Date (M/D/Y): _____

Estimated Installation Date (M/D/Y): _____

Owner Name: _____ **Mailing Address:** _____
 City: _____ Prov: _____ Postal Code: _____ Phone: _____
 Alt Phone: _____ Email Address: _____ Fax: _____

Contractor: _____ **Mailing Address:** _____
 City: _____ Prov: _____ Postal Code: _____ Phone: _____
 Alt Phone: _____ Email Address: _____ Fax: _____

Project Location: TOWN OF PONOKA **Street Address:** _____
 Unit #: _____ Lot: _____ Block: _____ Plan: _____ Subdivision Name: _____
 Legal Subdivision: Part of: _____ ¼ Sect: _____ Twp: _____ Rg: _____ W of: _____ Tax Roll #: _____
 Directions: _____

System Design Criteria (complete all applicable items): **Soil Log Report from two (2) test pits with Soil Analysis Report** (attach copy)
Expected Volume of Effluent: _____ cubic meters per day gallons per day liters per day **Number of bedrooms** _____
Project Type: Commercial (Conventional) Industrial (Conventional) Residential (Conventional) **Depth to Water Table** _____
 Commercial (Advanced) Industrial (Advanced) Residential (Advanced) **Work Camp # of Men** _____
SITE EVALUATION DIAGRAM: Attach a **detailed** site diagram including the system location in relation to buildings, distance to water supply and/or surface water bodies, and other pertinent information **(AS PER PART 7 OF THE CURRENT PRIVATE SEWAGE STANDARD OF PRACTICE)**.

Project Information: New Installation Alteration **Description of Work:** _____
Components Used: Septic Tank; Working Capacity Size _____ Lagoon Packaged Sewage Treatment Plant
 Holding Tank; Size _____ Open (surface) discharge At Grade
 Disposal Field; Size _____ Treatment Mound; Size _____ Sand Filter

Permit Applicant Declaration: The permit applicant certifies that this installation will be completed in accordance with the Alberta Safety Codes Act and Regulations. The personal information provided as part of this application is collected under the Safety Codes Act and the Municipal Government Act and in accordance with the Freedom of Information and Protection of Privacy Act. The information is required and will be used for issuing permits, safety codes compliance verification and monitoring and property assessment purposes. The name of the permit holder and the nature of the permit is available to the public upon request. If you have any questions about the collection or use of the personal information provided, please contact the municipality.

Installer's Name (please print) _____ Installer's Signature _____ Homeowner's Signature (Homeowner permits only) _____
 Private Sewage Installer's Certification Number: **PS** _____ **Homeowner Declaration: By signing this permit I hereby certify that I own or will own and occupy this dwelling.**

Permit Fee: \$ _____ ***SCC Levy:** \$ _____ **TOTAL FEE:** \$ _____
 *SCC Levy is 4% of the permit fee with a minimum of \$4.50 and a maximum of \$560
 Payment Method: Visa M/C Debit Cheque Cash Authorization / Cheque Number _____
 Credit Card #: _____ Expiry Date: _____ Date of Authorization: _____
 Name of Cardholder: _____ Signature of Cardholder: _____

Permit Validation Section to be completed by the Plumbing Safety Codes Officer: **Inspecting SCO:** _____
Permit Conditions: Call for inspection prior to completely covering the installation

 SCO's Name (print or type) _____ SCO's Signature _____
 SCO's Designation Number: _____ Date of Issue (M/D/Y): _____

Permit Number: _____

Name: _____

Date: _____

Private Sewage System Site Evaluation Diagram

Legal Description: _____

↑N													<p>Show the proposed location of the onsite sewage system and indicate the distances from the following:</p> <ul style="list-style-type: none"> • 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
<p>drainage course</p>	<p>slope direction</p>	<p>Test Pit 1 <input type="checkbox"/></p>	<p>Test Pit 2 <input type="checkbox"/></p>										

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

Permit Number: _____

Name: _____

Date: _____

Alberta Private Sewage Treatment System Soil Profile Log Form

Owner Name or Job ID											
Legal Land Location								Test pit			
LSD – ¼	Sec	Twp	Rg.	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):

Permit Number: _____

Name: _____

Date: _____

Private Sewage Treatment System Soil Profile Log Form

Owner Name or Job ID _____

Legal Land Location								Test pit	
LSD – ¼	Sec	Twp	Rg.	Mer.	Lot	Block	Plan	Easting	Northing

Vegetation Notes: _____ Overall Site Slope % _____
 Slope position of test pit _____

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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): _____