



The County
PRINCE EDWARD COUNTY • ONTARIO

Development Services
The Corporation of the County of Prince Edward
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Sewage System Permit Application

PERMIT NUMBER: _____

Please Print and Complete All Sections. Application must include two (2) diagrams

1. Owner Information

Name: _____
Mailing Address: _____
City: _____
Phone (h): _____ Phone (w): _____
Licence #: _____

2. Agent Information

Name: _____
Mailing Address: _____
City: _____
Phone: _____ Licence #: _____

3. Propose to _____ a Class _____ sewage system to serve a _____
(construct/alter/enlarge) (2-5) (single family dwelling/motel/cottage/etc.)

4. Property Description

Lot: _____ Concession: _____ Ward _____
Sub Lot No.: _____ Plan No.: _____ Lot Size: (m²) _____
Roll Number: _____

5. Directions to Lot (including 911 address): _____

6. Dwelling: New dwelling Existing Dwelling Existing building: Yes No
No. of bedrooms: existing _____ proposed _____ Are new plumbing fixtures proposed: Yes No

7. Water Supply Proposed Existing (Please include a copy of the well record)
 Dug or bored well Drilled Well Municipal Other: _____ Casing Depth (m): _____

8. Fixture Units	No.	Units	Total	9. Sub-surface Conditions Encountered	Depth (m)	Soil Type
Bathroom Group	_____	x 6	_____	Rock & GWT	0	
Bathub	_____	x 1.5	_____		0.25	
Toilet	_____	x 4	_____		0.50	
Clothes Washer	_____	x 1.5	_____		0.75	
Dishwasher	_____	x 1.5	_____		1.00	
Laundry Tubs	_____	x 1.5	_____		1.25	
Shower Drain	_____	x 1.5	_____		1.50	
Floor Drain	_____	x 2	_____			
Sinks	_____	x 1.5	_____			
Other: _____	_____	Total No. of Units	_____			

GWT – Ground Water Table
Estimated Percolation Rate of Existing Soils: _____
Estimated Percolation Rate of Imported Soils: _____

10. Sewage System Design/Description:

Class 2 Grey-water Leaching Pit Class 3 Cesspool Class 4 Leaching Bed (Conventional)
 Class 4 Leaching Bed (Filter Media Bed Systems) Class 4 (other) Class 5 Holding Tank

a) Class 2 Grey Water Leaching Pit:

Wall Structure Concrete Block Rock Other: _____
Soils Use Existing Import Soils (Describe): _____
Pit Dimensions Length: _____ Width: _____ Depth: _____

b) Class 3 Cesspool (Please Describe): _____

c) Class 4 Leaching Bed Sewage Systems – Septic Tank Information:

Existing tank OR New - approved tank Concrete tank OR Polyethylene tank
Daily Design Sewage Flow (DDSF): _____ liters/day
Septic Tank Capacity: DDSF X 2: _____ liters (min. 3,600 L)

Class 4 Leaching Bed (Conventional Trench Bed):

In-ground trench bed system Partially raised bed Fully raised bed Mantle is: Existing Soils OR Imported Soils
 Header Pipe Distribution box
Length of Tile Bed: _____ Width of Tile Bed: _____ Total area of Tile Bed: _____ No. of Runs of Tile: _____
Length of Tile Runs: _____ Total Length of Tile: _____ Diameter of Tile: 3" _____ Diameter of Tile: 4" _____
Treatment Unit: Yes No Pump Required: Yes No

Class 4 (Other): Please Describe: _____

d) Class 5 Holding Tank: Manufacturer: _____

7 Day Holding Capacity: _____ Daily Flow: _____
Tank Size: _____

11. I certify that the above information is complete and correct and I agree to comply with the provisions of the building and zoning by-laws of the County of Prince Edward. I also understand that it is my responsibility to arrange for the necessary inspections as required by the Inspector at the time of permit issuance.

Owner's Signature _____

Date _____

Agent/Installer's Signature _____

Date _____

Date _____

