

# Union County Environmental Health On-Site Wastewater Residential Construction Authorization Permit Application

### Property Owner:

Name: \_\_\_\_\_

Mailing Address:  
\_\_\_\_\_  
\_\_\_\_\_

Phone: home: (\_\_\_\_) \_\_\_\_\_

Work: (\_\_\_\_) \_\_\_\_\_

### Applicant:

Name: \_\_\_\_\_

Mailing Address:  
\_\_\_\_\_  
\_\_\_\_\_

Phone: home: (\_\_\_\_) \_\_\_\_\_

Work: (\_\_\_\_) \_\_\_\_\_

### Property Location:

Tax Code: \_\_\_\_\_

Street/Road Name: \_\_\_\_\_

Subdivision: \_\_\_\_\_

Phase/Section: \_\_\_\_\_ Lot #: \_\_\_\_\_

Lot Size: \_\_\_\_\_

Directions To Property: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### Water Supply (circle one):

Public      Individual Well      Community Well

### Proposed Residential Use:

House: \_\_\_\_\_ # Bedrooms: 2 3 4 5  
If more than 5, specify: \_\_\_\_\_

Square Feet: \_\_\_\_\_ Basement: Yes No  
Basement Plumbing Fixtures: Yes No

Mobile Home: \_\_\_\_\_ # Bedrooms: 2 3 4 5  
If more than 5, specify: \_\_\_\_\_

Other: \_\_\_\_\_

Garbage Grinder: Yes \_\_\_\_\_ No \_\_\_\_\_

### Addition:

Existing # Bedrooms: \_\_\_\_\_  
# Bedrooms to be added: \_\_\_\_\_  
Total # of Bedrooms: \_\_\_\_\_

### **Please Indicate Desired System Type:**

(Systems can be ranked in order of your preference as approved on your Improvement Permit)

\_\_\_\_ Conventional      \_\_\_\_ Modified      \_\_\_\_ LPP

\_\_\_\_ Mound      \_\_\_\_ Innovative      \_\_\_\_ Engineered

Other (specify): \_\_\_\_\_

### *Terms & Conditions:*

.. This application must be accompanied by a plat or site plan of the property that includes the existing and proposed property lines with dimensions, the specific location of the proposed facility and appurtenances including the driveway, the site identified and flagged for the proposed wastewater system and future standby repair area, and the location of any existing water supplies, water lines, and any surface waters.

..The applicant shall notify the Environmental Health Division of the Union County Health Department:

..Of the existence of any previously identified jurisdictional wetlands.

..If any wastewater other than domestic sewage is to be generated.

..If the site is subject to the approval by other public agencies.

..The construction authorization permit is issued based on the information contained in this application. Any change to the site or soil conditions, the property lines, the proposed use, the proposed design waste flow or characteristics shall be cause to revoke the construction authorization permit.

..By signing this application the applicant signifies the information contained in this application is accurate and true and that they understand the terms and conditions and that they give permission for Environmental Health representatives to perform necessary field evaluations, investigations, and procedures as necessary in order to determine suitability of site for use with an on-site wastewater treatment and disposal system.

(Application Must be Signed by Property Owner or Owner's Legal Representative)

Signed: \_\_\_\_\_

Date: \_\_\_\_\_