

**WASTEWATER TREATMENT SYSTEM APPLICATION
CONSTRUCTION PERMIT & INSPECTION SHEET
Keuka Watershed Improvement Cooperative
1 Keuka Business Park, Penn Yan, NY 14527 (315)536-0917**

This application is being made for a permit to construct, repair, inspect or reconstruct a wastewater treatment system at the property described below. Please provide all applicable information indicated, if possible. Applicants are advised that construction, repair, inspection, or replacement of wastewater treatment systems are subject to regulation by the wastewater treatment laws of the municipalities of Barrington, Hammondsport, Jerusalem, Milo, Penn Yan, Pulteney, Urbana, and Wayne and their mutual agreement in the Keuka Watershed Improvement Cooperative as well as the New York State Public Health Law.
(Please type or print)

Property and Owner Identification

Tax parcel identification number _____ **Town** _____
Property address _____
Property owner _____
Address _____
Telephone number _____
_____ **Existing structure** _____ **new or increase water demand**

Action Request Information

Action requested by _____ **Affiliation** _____
Address _____
Telephone number _____
Action _____ Construction Permit _____ Inspection _____ Tank Replacement
Request date of action (give two or three) _____
Purpose of request: _____ property transfer _____ request _____ malfunction _____ repair
_____ Construction _____ other (please describe) _____
Fee \$ _____ to be paid by _____
*** Payment is due prior to review of plans or evaluation**

Household Information

_____ Owner/occupied _____ rental _____ vacant land **Lot size** < 1 acre or > 1 acre
_____ Full time _____ seasonalIf seasonal, # weeks per year: _____
_____ **Garbage grinder** _____ **Hot Tub, Jacuzzi or High water use unit** _____ **Water softner**
Last know date occupancy: _____Number of occupants: _____
Age of home: _____ yrs. Total square footage: _____ # of bathrooms: _____
Number Of bedrooms: _____. **Water-saving fixtures?** ___ yes ___ no
Home business or hobby? (e.g. daycare, salon etc.) ___ yes ___ no
Type _____
Number of employees _____ Seating capacity _____
Regularly use medications? (e.g. chemotherapy, dialysis): ___ yes ___ no
Are there any wells on the property? ___ yes ___ no How many? _____
Household fresh water source: ___ public ___ dug well(s); _____ drilled well; ___ spring(s); _____ lake; _____ ' depth
List all public or private buried utilities or structures on property: (gas, electric, phone, etc)

Is there a well on additional property within 200 feet _____ yes _____ no
Is the foundation a full basement _____ partial basement _____ crawl space _____ slab _____

over

Onsite Wastewater Treatment System (s)

How many systems are on the property? _____ Year system(s) installed _____

Tank _____ Absorption system _____

Are all components wholly within the property boundaries? ___ yes ___ no

Are system plans available? ___ yes ___ no Does system(s) serve multiple properties ___ yes ___ no

If yes, describe _____

Maintenance

Service agreement? ___ Yes ___ no If yes, vendor name _____

Date of last inspection _____; N/A _____ Date tank last pumped _____ N/A _____

Frequency of pumping _____; N/A _____

List known repairs/replacements, with dates:

Date _____ Type of Repair/Replacement _____

Operation

➤ System problems? ___ yes ___ no

Sewage odors? ___ yes ___ no

➤ Direct surface discharge? ___ yes ___ no

Back-up toilets or fixtures? ___ yes ___ no

➤ Slow drains? ___ yes ___ no

Seasonal ponding or breakout ___ yes ___ no

Statement of Acceptance of Conditions

I agree to:

- ✓ Ensure that the septic tank(s), distribution box(es), and/or seepage pit(s), if any, will be uncovered **prior to** the requested inspection time
- ✓ Have a seepage hauler on site (to pump the tank **after*** the inspector arrives) inspector shall see tank pumped
- ✓ Have an authorized representative present at the site to provide access to home for inspection or interior pipes.
- ✓ Allow the inspector, KWIC Manager or representative to verify information provided above, and to conduct an inspection of the indicated onsite wastewater treatment system(s), including all system components, and interior and exterior plumbing.
- ✓ Applicants may accept a plan developed through consultation with the Keuka Watershed Improvement Cooperative or choose to present a design prepared by a licensed professional engineer. In some circumstances, the applicant will be required to submit an engineer’s design. The applicant agrees that the Keuka Watershed Improvement Cooperative, its officers, employees and agents shall not be liable for any act or omission, and shall hold KWIC, its officers, employees or agents free and harmless for any failure of the wastewater treatment system including, but not limited to, contamination of surface or ground water supplies, as a result of the plan, construction and operation of the wastewater treatment system permitted by the Keuka Watershed Improvement Cooperative. On some sites where a building or dwelling is already present, it may be impossible to meet current sanitary code standards intended to safe guard public health and water quality. Where this is the case, the wastewater treatment system plan must reflect best available technology for wastewater treatment and prevention of public health hazards.
- ✓ To furnish a floorplan showing all the bedrooms if requested.

To the best of my knowledge, the information provided above is accurate. I agree to be responsible for fee payment.

Signature of property owner or authorized agent: (authorized agent shall have a letter of authorization from owner included with application)

Please print name:

Affiliation: _____ owner _____ agent,

Signature: _____ Date _____