



Environmental Health

612 E. Campbell St.
Westmoreland, KS 66549
Phone: 785-457-3397
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Scott Schwinn, R.S. County Sanitarian

HEALTH PERMIT APPLICATION Request for Installation of Private Sewerage System

I _____, whose permanent mailing address is:

(Name)

Phone# _____

(Address)

(Daytime Phone Number)

E-Mail: _____

do hereby apply for a permit to construct and operate a private sewer system to serve a:
Commercial business Single family dwelling

The Legal description or address of the property is:

Profile or Percolation Test Results (by qualified county personnel)

Date: _____ **By:** _____ **Results:**

In making this application, I hereby certify that I am aware of, and will comply with, the requirements of the Pottawatomie County Sanitary Code; The Pottawatomie County Sanitarian; and any special provisions/ requirements that he/she may feel necessary. I further understand that I must notify the County Environmental Health Department for inspection of any septic system (before covering) or any lagoon prior to the system being put into operation. I will have been issued a health permit before any installation or construction work begins, **(Health Permit Fee \$150.00 for new construction or \$25.00 for reconstruction)** or I shall pay an additional late Inspection Fee of \$100.00. Failure to call for an inspection can result in a fine of not more than \$200.00 per day per offense. Each day constitutes a separate offense. In addition, the septic system may be required to be uncovered or the lagoon corrected at the owners expense and then properly inspected.

Date: _____ **Applicant Signature:** _____

Permit application MUST be signed or a permit will not be issued.

A site plan MUST be attached to the Health Permit Application. The site plan MUST be received and reviewed by the County Sanitarian prior to a Health Permit being issued.

PLEASE COMPLETE BOTH PAGES OF APPLICATION

DWELLING INFORMATION

Total Acres in parcel:	_____	Garbage Disposal:	Yes	No
No. of People (occupants):	_____	Dishwasher:	Yes	No
No. of Bedrooms:	_____	Residence:	New	Existing
No. of Bathrooms:	_____			

WATER SUPPLY INFORMATION

Well: **Yes** **No, Rural Water District:** __

Note: No private water well used for domestic consumption shall be constructed on a track of ground of less than five (5) acres in size unless approved by the Administrative Agency.

CONTRACTOR INFORMATION

System to be installed by:

Comments: