



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF WATER SUPPLY AND WASTEWATER MANAGEMENT

APPLICATION FOR AN ONLOT SEWAGE DISPOSAL SYSTEM PERMIT

PART I APPLICANT AND SITE INFORMATION

1. Applicant Name _____ Address _____ Telephone No. Day () _____ Evening () _____	2. Site Address _____ Street, RR, Box No. _____ Post Office _____ State _____ Zip _____ Subdivision Name _____ Lot No. _____ Municipality _____ County _____
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Directions to the Site: _____

3. Lot Size _____ sq. ft./acres	4. Type of Facility to be Served by this System <input type="checkbox"/> Single Family Residential <input type="checkbox"/> Multifamily Residential No. of Bedrooms _____ <input type="checkbox"/> Commercial/Nonresidential
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6. Facility Water Supply: Public Well Spring Cistern Surface

7. Distance to the nearest existing or proposed Private Water Supply (on or off the property) _____ ft.

PART II LOCAL AGENCY USE ONLY

SEWAGE PLANNING	SITE SUITABILITY	STATUS
<input type="checkbox"/> Approved Planning Mod. _____ DEP Code No. _____ (date) _____ <input type="checkbox"/> Area Not Planned (lot created before May 15, 1972) <input type="checkbox"/> Limitations in Effect	Soil Series _____ Slope _____ % Type of Limiting Zone _____ Depth of Limiting Zone _____ inches Type of Cover _____ Ag. Grass, Forest	Percolation Rate _____ min. Not conducted _____ Site Is: <input type="checkbox"/> Suitable for ingre <input type="checkbox"/> Suitable for e <input type="checkbox"/> Unsuita
FEES PAID Application \$ _____ Testing _____ Inspection(s) _____ Other _____ Total \$ _____		<input type="checkbox"/> Approved _____ <input type="checkbox"/> Disapproved _____ <input type="checkbox"/> Revoked Permit _____ Final Inspection _____ SEI Initials _____

PART III PLOT PLAN AND SYSTEM DESIGN

1. System Classification <input type="checkbox"/> Conventional <input type="checkbox"/> Alternate <input type="checkbox"/> Experimental	2. Tank Capacity _____ gal. <input type="checkbox"/> Gravity <input type="checkbox"/> Automatic	3. Type of Filter <input type="checkbox"/> Buried Sand <input type="checkbox"/> Free Access Sand <input type="checkbox"/> Other Media _____ <input type="checkbox"/> Effluent
4. Type of Disinfection <input type="checkbox"/> CL Erosion <input type="checkbox"/> CL Hypo <input type="checkbox"/> UV	6. Absorption Total Absorption Area _____ sq. ft. <input type="checkbox"/> Std. Trench <input type="checkbox"/> Std. Bed <input type="checkbox"/> Elev. Sand Mound <input type="checkbox"/> Elev. Sand Trench <input type="checkbox"/> IRSIS <input type="checkbox"/> Drip Dispersal <input type="checkbox"/> At-Grade <input type="checkbox"/> Other	

7. Other _____

Attach the Following Documentation

A copy of the Form 3800-FM-WSWM290A (and B when required) or a morphological evaluation report (See Part II).
 A detailed plot plan and sewage system design (including cross sections plan reviews and comments). See instructions on reverse side for required details. Indicate the number of attached sheets

PART IV SIGNATURE

I am the _____ (agent of the owner) of the lot described in Part I of this application. I intend to install an onlot sewage system on this property. The information provided in this application is true and correct to the best of my knowledge. I understand that providing false information is a violation of 18 PA C.S.A. §4904, relating to unsworn falsification to authorities. Submission of this form grants authorized personnel of the DEP and/or DEP access to the lot to inspect and conduct tests of 1) the site; 2) the system and structures under construction; 3) the completion of the system; and, 4) the operational status of the system.

Property Owner's _____ Date _____

The information in this application is true and correct to the best of my knowledge.

SEO Signature _____ Date _____ Certification No. _____

SAMPLE OF FORM
 Call Will Evans, Sewage Enforcement Officer, at 570.842.7032
 for an original, numbered copy of this form.
 He will provide assistance in completing the form.