



Working for Healthy Communities

Waste Water System Permit Application

Office Only:

Permit Number: _____

Archive ID: _____

Applicant Information:

Name: _____ Phone: _____

Mailing Address: _____

Waste Water System Location: _____

County: _____ Town/City: _____ GPS: _____

Email: _____

This waste water system is designed for:

A. Single Family Dwelling.

No. of Bedrooms*: _____
Main/ Upper Basement

*Add at least one additional bedroom for an unfinished basement

B. Other: _____

No. People Served: _____

Estimated Waste Water Flow*:

_____ Gallons per Day (GPD)

*See Table 3 of Utah Administrative Code R317-4

Size of Tank* Required: _____ Gallons

*Tank must be from an approved manufacturer

Total ft² Absorption Area Required*:

GPD _____ / _____ HLR* = _____ ft²

*As determined by estimated flow and soil type. (See Table 5 or 6 of Utah Administrative Code R317-4)

*Hydraulic Loading Rate (HLR)

Type of absorption system:

A. Standard Trench

B. Chambered Trench

C. Absorption Bed

D. Deep Wall Trench

E. Other: _____

Notes: _____

System dimensions, lot layout, trench cross section, and other required information must be shown on the diagram page.

Water Source: Public: Name of system: _____

Private: Well (grouted Y/N) or Spring or Other: _____

Distance from Waste Water System: _____

Installation Contractor: _____ License Number: _____

System Designer Certification: I, _____ certify that I hold a current level two onsite system professional certification and I have designed the system in accordance to the standards of UT Admin Code R317-4 Onsite Waste Water Systems.

Certificate Number: _____ Signature: _____ Date: _____

This Waste Water System will meet min. requirements of the Central Utah Public Health Department if constructed as proposed. Permit application and fee must be submitted and a permit issued prior to any construction. Also, system must be inspected prior to backfilling.

Signed: _____
(Environmental Health Scientist)

Date: _____ Permit Fees:

Tank Sizes: 1,000 – 2,500 gal. = **\$365.00**

2,501 & Up = **\$395.00**

Drainfield Addition/Replacement = **\$85.00**



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Soil Log/Percolation Test Record Sheet

Name: _____

Date: _____

Soil Layer Depth Intervals	Soil Texture	Soil Structure	USCS Group Symbol	Particle Size Distribution (percent)				
				Cobbles	Gravel	Sand	Silt	Clay
Surface to _____ ft.								
to _____ ft.								
to _____ ft.								
to _____ ft.								
to _____ ft.								
to _____ ft.								

Soil Percolation Test #	Total Depth of Hole (ft.)	Period of Time Hole Presoaked	Period of Time Soil Allowed to Swell	Initial Depth of Water	Beginning Time	Final Depth of Water	Ending Time	Distance Water Dropped	Elapsed Time	Perc. Rate in Min/in

Final Stabilized Percolation Rate _____ Minutes per Inch

1. Maximum Seasonal Ground Water Elevation: _____
2. Distance from Wells Within 1500' of System: _____

Note: Soil exploration must extend to a **MINIMUM** depth of **10'** and for deep systems **AT LEAST 4'** below the bottom of proposed trench.

I, _____ certify the above information to be an actual description of the Physical Site Characteristics of the proposed subsurface wastewater disposal system.

Signature: _____
(Certified Soil Tester)

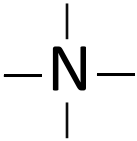
Certification No.: _____



Waste Water System Design

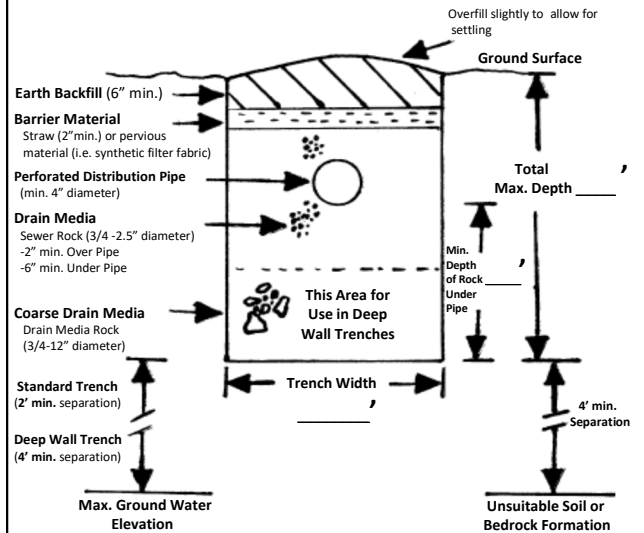
Name: _____ Date: _____

Site Location: _____
 (Show Street address or attach legal description of system location)



Sketch Wastewater System diagram in this space

Standard & Deep Wall Trench Cross Section:



Total Depth from Top of Septic Tank to Ground Surface: _____

Other Absorption System Cross Section:
 (i.e. Chambered, Absorption Bed, etc...)

Show All Measurements

1. Locate all features which pertain to the wastewater disposal system in the site area indicated above. Plan must include the following:

- | | |
|--|---------------------------------------|
| a. Buildings | g. All Water Courses |
| b. Water Service Lines | h. Soil Test Locations |
| c. Property Lines Within 15' of Sewer System | i. Driveways |
| d. Wells | j. Existing trees |
| e. Septic Tanks | k. Contour Lines with Reference marks |
| f. Absorption System | |

System Designer: _____

Note: This application is only a guide. However, all information required on this form must be submitted. Other plans and information may be submitted as a substitute or in addition to this application.