

PROJECT INFORMATION

Type of Work: New Repair Demo
Occupancy Served: Residential Other _____
(Specify)

FIXTURE INFORMATION

Description	Total #	X	Fixture Units	=	Total Fixture Units
Water Closet (Flush Tank Toilet)	_____	X	_____	=	_____
Each Sink or Washbasin	_____	X	_____	=	_____
Bathtub or Shower	_____	X	_____	=	_____
Dishwasher	_____	X	_____	=	_____
Clothes Washing Machine	_____	X	_____	=	_____
Single or Double Laundry Tubs	_____	X	_____	=	_____
Other _____	_____	X	_____	=	_____
Other _____	_____	X	_____	=	_____
*Total Fixture Units					_____

Total finished area of dwelling, (excluding the area of the finished basement & garage) _____ m²
Total fixture units within all buildings on the property (from above)* _____
Total # of bedrooms on the property _____ Daily flow rate _____ litres/day

SITE EVALUATION INFORMATION

Site Evaluation Name: _____ Phone: _____
Performed By: Address: _____ Postal Code: _____
Water Supply: Proposed Existing Municipal
 Dug/Bored Well Point Well Drilled Well Other (Explain) _____
Water Treatment: Water Softener Other (Explain) _____
Describe the existing soil conditions in sewage system area: Type: _____
Soil Percolation Time: _____ min/cm Percolation Test Date: _____
Soil grains analysis report: Yes, attached No
Depth to bedrock/impervious soil layer: _____ m To high water table: _____ m
Nearest Well On this lot On adjacent lot Watertight cased to 6 m Distance _____ m
Next Nearest Well On this lot On adjacent lot Watertight cased to 6 m Distance _____ m

SEWAGE SYSTEM INFORMATION

Class 2 Grey-Water Pit **Class 3** Cesspool Describe: _____

Class 4 Trench Bed Analysis of Filter Material: Received
 Use Existing Soil or Imported Soil Fill-base Absorption Trenches: Area _____ m²
Percolation Rate: _____ min/cm Height: _____ Header or Distribution Box
Total Length of Tile: _____ m = # runs of tile _____ x length of run _____
Tank Use Existing New (Gov't Approved) Concrete Polyethylene Capacity (L) _____

Class 4 Filter Bed Analysis of Filter Material: Received
Contact Area: _____ m² Header or Distribution Box
Extended Contact Area: _____ m² (include mantel)
Total Length of Tile: _____ m = # runs of tile _____ x length of run _____
Tank Use Existing New (Gov't Approved) Concrete Polyethylene Capacity (L) _____

Class 4 Treatment Unit Manufacturer: _____ Model: _____
Primary Tank Size (L) _____ Secondary Tank Size (L) _____
Daily Flowrate Capacity (L) _____

Class 5 Holding Tank Pump out Agreement must be provided. Received
Manufacturer: _____ Model: _____ Capacity (L) _____
 Concrete Steel Polyethylene Other _____
Alarm: Audio and/or Visual Licenced Hauler: _____

Pump For any of the above, is a pump required? Yes No
If yes, Head _____ Run _____ Horsepower _____ Capacity (L) _____

