



Office Use Only:

Permit No: \_\_\_\_\_

Total Fee \_\_\_\_\_

## PRIVATE SEPTIC PERMIT APPLICATION

THE APPLICANT IS:     OWNER             CONTRACTOR

SITE ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

JOB DESCRIPTION: \_\_\_\_\_ VALUATION: \$ \_\_\_\_\_

<b>OWNER</b>	NAME _____ ADDRESS _____ CITY _____ STATE _____ ZIP _____ PHONE # WHERE YOU CAN BE REACHED _____ EMAIL: _____
<b>CONTRACTOR</b>	COMPANY NAME _____ LICENSE # _____ ADDRESS _____ CITY _____ STATE _____ ZIP _____ CONTACT NAME _____ PHONE # WHERE YOU CAN BE REACHED _____ MASTER PLUMBER NAME: _____ LICENSE # _____ EMAIL: _____
<b>PERMIT TYPE</b>	<input type="checkbox"/> SEPTIC - NEW / REPAIR / REPLACE    EXPLANATION _____

FOR:     RESIDENTIAL             COMMERCIAL             INDUSTRIAL

STREET EXCAVATION NECESSARY?     YES     NO

**THE UNDERSIGNED HEREBY AGREES THAT, IN CASE SUCH PERMIT IS GRANTED, THAT ALL WORK WHICH SHALL BE DONE AND ALL MATERIALS WHICH SHALL BE USED SHALL COMPLY WITH THE PLANS AND SPECIFICATIONS HEREWITH SUBMITTED AND WITH ALL THE ORDINANCES OF SAID CITY OF DAYTON APPLICABLE HERETO.**

NAME OF APPLICANT (please print): \_\_\_\_\_

APPLICANT'S SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**OFFICE USE ONLY:**

**WORK TYPE:**

- \_\_\_ NEW
- \_\_\_ ADDITION
- \_\_\_ REPAIR
- \_\_\_ DEMOLISH
- \_\_\_ REPLACE
- \_\_\_ ALTER/REMODEL

**INSPECTIONS:**

- \_\_\_ FINAL
- \_\_\_ STREET DRAINTILE
- \_\_\_ OTHER \_\_\_\_\_

**PERMIT FEE:**

- METRO WAC: \$ \_\_\_\_\_
- METRO SAC: \$ \_\_\_\_\_
- CITY WATER PERMIT: \$ \_\_\_\_\_
- CITY SEWER PERMIT: \$ \_\_\_\_\_
- CITY WATER CONNECTION: \$ \_\_\_\_\_
- CITY SEWER CONNECTION: \$ \_\_\_\_\_
- METER: \$ \_\_\_\_\_
- SEPTIC: \$ \_\_\_\_\_
- TOTAL:** \$ \_\_\_\_\_

**REQUIRED APPROVAL:**

BUILDING INSPECTOR: \_\_\_\_\_ DATE: \_\_\_\_\_

COMMENTS:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_