



# Waste Water System Permit Application

Office Only:  
Permit Number: \_\_\_\_\_  
Paid: \_\_\_\_\_ Received By: \_\_\_\_\_

## Applicant Information:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
Waste Water System Location: \_\_\_\_\_  
County: \_\_\_\_\_ Area/City: \_\_\_\_\_ GPS: N  
Email: \_\_\_\_\_ W

This waste water system is designed for:

A. Single Family Dwelling.

No. of Bedrooms\*: \_\_\_\_\_  
Main/ Upper Basement

\*Add one additional or the known amount of bedrooms 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 ft<sup>2</sup> Absorption Area Required\*:

GPD \_\_\_\_\_ ÷ \_\_\_\_\_ HLR\* = \_\_\_\_\_ ft<sup>2</sup>

\*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: \_\_\_\_\_

Lot Size: \_\_\_\_\_ Acres or \_\_\_\_\_ Square Ft.

Water Source:  Public: Name of system: \_\_\_\_\_

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

Distance from Waste Water System: \_\_\_\_\_

Installation Contractor: \_\_\_\_\_ License #: \_\_\_\_\_ Phone: \_\_\_\_\_

Soil Tester: \_\_\_\_\_ Certificate #: \_\_\_\_\_ -OSP- Phone: \_\_\_\_\_

Designer: \_\_\_\_\_ -OSP- \_\_\_\_\_

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: \_\_\_\_\_ Date: \_\_\_\_\_ Permit Fees: Conventional Wastewater System = \$425.00  
(Environmental Health Scientist) Repair/Replacement Drainfield = \$125.00



# Soil Log/Percolation Test Record Sheet

Name: \_\_\_\_\_

Site Location: \_\_\_\_\_

*Working for Healthy Communities*

Soil Layer Depth Intervals	Soil Texture	Soil Structure (i.e. Single Grain, Granular, Blocky, Platy, Prismatic, Massive)	USCS Group Symbol	% Rock in Soil		% Soil Particle Distribution (Sand + Silt + Clay = %100)		
				Cobbles	Gravel	Sand	Silt	Clay
Surface to _____								
_____ to _____								
_____ to _____								
_____ to _____								
_____ to _____								
_____ to _____								

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. Depth from Ground Surface to Unsuitable Soil or Bedrock Formation: \_\_\_\_\_
3. Distance from Public Wells Within 1500' of system: \_\_\_\_\_ and Private Wells Within 200' 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)

Date: \_\_\_\_\_

# Waste Water System Design



Name: \_\_\_\_\_

Site Location: \_\_\_\_\_

<div style="text-align: center; margin-bottom: 20px;"> </div> <p style="text-align: center; font-weight: bold;">Sketch Wastewater System diagram in this space</p>	<div style="text-align: center; margin-bottom: 10px;"> <b>Standard &amp; Deep Wall Trench Cross Section:</b> </div> <p style="text-align: center; font-weight: bold;">Total Depth from Top of Septic Tank to Ground Surface: _____'</p>
	<div style="text-align: center; margin-bottom: 10px;"> <b>Other Absorption System Cross Section/Notes:</b>                  (i.e. Chambered, Absorption Bed, etc...)             </div> <p style="text-align: center; font-weight: bold;">Sketch Cross Section in this Space if Applicable</p>

## Show All Measurements

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

- |  |  |
|--|--|
| <input type="checkbox"/> Onsite Waste Water System<br><input type="checkbox"/> Water Service Lines<br><input type="checkbox"/> Property Lines Within 15' of Sewer System<br><input type="checkbox"/> Wells Within 200' of Sewer System<br><input type="checkbox"/> All Water Courses | <input type="checkbox"/> Buildings<br><input type="checkbox"/> Soil Test Locations<br><input type="checkbox"/> Driveways<br><input type="checkbox"/> Existing trees<br><input type="checkbox"/> Contour Lines with Reference marks |
|--|--|

### System Designer Certification:

I, \_\_\_\_\_ certify that a I hold a current level 2 onsite system professional certificate and I have designed the system in accordance to the standards of UT Admin Code R317-4 Onsite Waste Water Systems.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
 (Certified 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.