### **TOWN of WEMBLEY**

# **Private Sewage Disposal Permit Application**





10001 - 84th Avenue, Clairmont, AB T8X 5B2 Phone: 780.513.3950 Fax: 780.539.7686 Email: plan@countygp.ab.ca

#### Permit Number:

Application Date:	Development Permit Number:				
Permit Type:	☐ Owner ☐ Contractor Building Permit No.:				
Other Permits/Application	ns Required:   Development   Building   Electrical   Plumbing   Gas				
Landowner:					
Mailing Address:	•				
	City:		Provin	ce:	
	Postal Code:		Phone	:	
	Fax:		E-mail:	:	
Applicant:					
Mailing Address:					
	City:		Provin	ce:	
	Postal Code:		Phone	:	
	Fax:		E-mail:	:	
Contractor Name:					
Mailing Address:					
	City:		Provin	ce:	
	Postal Code:		Phone:		
	Fax: E-mail:				
	Certified Installer/Journeyman's Name:				
	Certified Installer/Journeyman Number:				
Legal:	Lot:	Block:	Plan:		
	Part of:	1/4 Sec:	Twp: Rn	ng: W6M	
Civic/Rural Address:					
Subdivision Name:					
Estimated Start Date:	te: Estimated Completion Date:				
Type of Work:	☐ New Work	☐ Renovation	☐ Connection	☐ Temporary	
*Please check all that apply	□ Camp □ O	ther			
late a de dille	□ A gwigudhuwgl	☐ Residential	☐ Commercia	al □ Industrial	
Intended Use:	☐ Agricultural		□ Commercia	ai 🗀 industrial	
	☐ Institutional	☐ Other			

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welvible Yin the heart of the action	Permit Number:				
System Design Criteri	ia (please complete all applicable items):				
<b>5</b> /5.5 55.6	□ New Installation □ Alterati	ion			
	Volume of Effluent:	☐ m³/day ☐ gallons/day ☐ litres/day			
	Volume of Emache.				
	Category A:				
	☐ Septic Tank	Size:			
	☐ Holding Tank	Size:			
	□ Other	Size:			
	Category B:				
	☐ Open (Surface) Discharge	Size:			
	☐ Packaged Sewage Treatment Pla	nt			
	☐ Sewage Lagoon				
	☐ Sand Filter				
	☐ At Grade (Variance Required)				
	☐ Disposal Field				
Description of Wor	·				
•	·				
permit is suspended or The personal informatic 642 of the Municipal Go of where the developme questions on the collect. In the event that this per that any previous work. I hereby certify that I an agree to all applicable land.	abandoned for a period of 120 days at any time a con on this form is collected under the authority of overnment Act and /or the Safety Codes Act. The ent /use is being proposed may be made available ion and use of the information; please contact the ermit is taken out to complete works started under started for the project is completed in accordance on the owner or owner's agent of the property for	Management Plan (QMP) without extension request. If the work authorized by the offer the work has commenced, the permit will expire.  If Section 33(c) of the Freedom of Information and Protection of Privacy Act, Section information will be used to process the application(s) and the names &/or address to the public upon request or at a Public Council Meeting. If you have any the FOIP Representative at 780-532-9722.  The acancelled permit for the specific project, the applicant assumes responsibility the with Safety Codes Standards by time of project completion.  This application. I have read and understood the statements printed on this form.  Applicant Signature			
Application Fee:	WEMBLEY Portion of Permit Fee: COUNTY Portion of Permit Fee:	WMLB WMRV			
	Penalty:	CR42			
	Permit Fee Subtotal:				
	Safety Codes Council Levy:	CR95			
	Other Fee:				
	Total Fee:				
Payment Method:	☐ Cash ☐ Debit ☐ Cheque ☐ Vi	☐ Cash ☐ Debit ☐ Cheque ☐ Visa ☐ MasterCard ☐ Money Order ☐ Invoice			