

Permit # \_\_\_\_\_

## WASTEWATER SYSTEM PERMIT

Cherokee County Emergency Management

P.O. Box 143

Columbus, KS. 66725

Office # 620-429-9556 Cell # 620-210-0999

### APPLICANT INFORMATION

\_\_\_ Reconstruction

\_\_\_ New Installation

**Type Of System:** Conventional\_\_\_ Lagoon\_\_\_ Other (Specify)\_\_\_\_\_

**Applicant Name**\_\_\_\_\_

**Current Address**\_\_\_\_\_ **City/State/Zip**\_\_\_\_\_

**Site Address (911)** \_\_\_\_\_ **City/State/Zip**\_\_\_\_\_

**Phone #(Home)**\_\_\_\_\_ **(Cell)**\_\_\_\_\_

**Type of Occupancy:**

**Residential-** (Acreage) \_\_\_\_\_ (# of Bedrooms) \_\_\_\_\_

**Commercial-** (Type) \_\_\_\_\_  
(Acreage) \_\_\_\_\_ (# of People) \_\_\_\_\_

\*Are there any additional water usages that we need to consider, such as home business, day care, bed & breakfast, or beauty shop? Yes / No If yes, explain:  
\_\_\_\_\_

I certify that the above information is correct, and the proposed system will be completed in accordance with the Environmental Code.

**Applicant Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Permit Fee:** \$30.00 (Reconstruction) \_\_\_\_\_

\$40.00 (New Installation) \_\_\_\_\_

ANY WORK ON THIS PROPOSED SITE CANNOT BEGIN UNTIL THE PERMIT HAS BEEN COMPLETED (INCLUDING A DETAILED SKETCH WITH SEPERATION DISTANCE INFORMATION FROM A LICENSED CONTRACTOR) A SITE EVALUATION, AND THE APPROVAL FOR A PERMIT ISSUED BY THIS OFFICE.

**INSTALLATION INFORMATION**

**PROVIDE A DETAILED DRAWING OF THE ENTIRE PROPOSED WASTEWATER SYSTEM, INCLUDING SEPERATION DISTANCES AND RELEVANT DIMENSIONAL INFORMATION.**

**REVISIONS TO ORIGINAL PLAN MUST BE APPROVED PRIOR TO INSTALLATION.**

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\_\_\_\_\_ GALLON SEPTIC TANK (MANUFACTURER) = \_\_\_\_\_

\_\_\_\_\_ TRENCH WIDTH \_\_\_\_\_ LINEAR FT. OF LATERALS \_\_\_\_\_ TOTAL SQ. FT.

\_\_\_\_\_ LAGOON CLASSIFICATION (M-SIZE)

\_\_\_\_\_ DISTANCE FROM SYSTEM TO PROPERTY LINE (10' MIN. / LAGOONS= 50' MIN.)

\_\_\_\_\_ DISTANCE FROM SYSTEM TO DWELLING FOUNDATION (20' MIN. / LAGOONS= 50')

\_\_\_\_\_ DISTANCE FROM SYSTEM TO PRIVATE WATER LINE (10' MIN.)

\_\_\_\_\_ DISTANCE FROM SYSTEM TO PUBLIC WATER LINE (25' MIN.)

\_\_\_\_\_ DISTANCE FROM SYSTEM TO AREA WELLS (100' MIN)

**SPECIAL SYSTEMS SUCH AS CHAMBER SYSTEMS, DRIP DISTRIBUTION, AEROBIC TREATMENT, MOUND SYSTEMS, RECIRCULATING SAND FILTER, EVAPOTRANSPIRATION, WETLAND AND CLUSTER/COMMUNITY SYSTEMS WILL BE SUBJECT TO SPECIAL APPROVAL BY THIS OFFICE.**

I certify that the above information is correct and that the proposed work will be completed in accordance with this plan and the Cherokee County Environmental Code.

**Contractor Print** \_\_\_\_\_ **Contractor Signature** \_\_\_\_\_  
**Date** \_\_\_\_\_

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**APPROVED BY:** \_\_\_\_\_ **DATE** \_\_\_\_\_ **PERMIT #** \_\_\_\_\_

DISCLAIMER OF LIABILITY

This permit shall not be construed or interpreted as imposing upon Cherokee County Emergency Management, or employees any liability or warranty that any system installation, or portion thereof, that is constructed, or repaired under the Cherokee County Environmental Code will function properly.

