



Rural Plumbing/Sewage Disposal Permit Application

In compliance with the provisions of the Saskatchewan Plumbing and Drainage Regulations application is hereby made for permission to:
 Construct Reconstruct Extend Connect the: plumbing system private sewage works
 on the premises or property of:

City, Town or Village		Street		
Lot/Parcel No.		Block	Plan	
R.M. #	Section	Township	Range	West of Meridian
Plumber / Sewage Works Installer		Address Phone #	Certificate of Status # _____ <input type="checkbox"/> Journeyman <input type="checkbox"/> Other _____	
Permit Applicant		Address Phone #	Signature	
Property Owner			Mailing Address	

Plumbing System --Number of fixtures to be installed

Kitchen Sinks _____	Shower Stalls _____	Laundry Tubs _____
Lavatories _____	Bath Tubs _____	Clothes Washer _____
Water Closets _____	Floor Drains (No Charge) _____	Other Fixtures _____

**No part of the plumbing system or private sewage works shall be covered until permission is granted by the Local Authority (Public Health Inspector). For plumbing inspection or consultation, call Sunrise Public Health at:
 Yorkton Office- (306) 786-0600 Foam Lake Office - (306) 272-3376**

Private Sewage Works

A detailed Site Plan is to be provided on page 2. No part of the private sewage works shall be covered until permission is granted by the Local Authority.

- A. Expected Daily Sewage Volume (Litres) _____ # of Bedrooms _____
- B. Soil classification: Sand Loam Silt Clay Sandy/Loam
- C. Percolation Test: _____ minutes per 25 mm
- D. Depth to Water Table if less than 3 m from ground surface _____ m
- E. Septic Tank Holding Tank Size _____ gals/litres.
- F. Disposal Systems (indicate type of effluent disposal system to be installed):
 - i) Jet Type Disposal
 - ii) Absorption Field (size) _____ m²
 - iii) Gravity Flow Chamber System
 - Chamber System (size) _____ m² # of Chamber Units _____ Size of each Chamber _____ m²
 - iv) Pressure Chamber System
 - v) Sewage Mound Type I _____ m³ of clean graded stone
 - vi) Sewage Mound Type II _____ m³ of clean graded stone
 - vii) Lagoon (lagoon capacity) _____ m³
 - viii) Other (specify) _____

Permit Fee

Total number of Fixtures _____	Fee	\$ _____	
Private Sewage Works _____	Fee	\$ _____	
Connection to Communal Sewage Works or Communal Waterworks _____	Fee	\$ _____	Total \$ _____

Detailed design work sheet required for this installation. Yes No Work sheet received (Date) _____

Permission is hereby granted to construct the work indicated above.

Signature of Local Authority _____
 (Public Health Officer, Sunrise Regional Health Authority)

Date	
Fee Received \$	

Plumbing System

Date(s) Tested/Inspected _____

Approved _____
 (Signature of Local Authority)

Private Sewage Works

Date(s) Tested/Inspected _____

Approved _____
 (Signature of Local Authority)

Fees:
 \$50.00 - 1 or 2 fixtures, other alteration
 \$100.00 - 3 to 10 fixtures
 \$5.00 - Each fixture over 10 (no charge for floor drains)
 \$30.00 - Private Sewage Works
 \$50.00 - Connect plumbing system to communal or private sewage works.

For Inspection or Consultation, call a Public Health Inspector at Sunrise Public Health:
 Yorkton-(306)786-0600 or Foam Lake -(306)272-3376

