



IMPROVEMENT PERMIT AND/OR AUTHORIZATION TO CONSTRUCT APPLICATION

____Improvement Permit _____Authorization to Construct _____Well _____Receipt #

IF THE INFORMATION IN THE APPLICATION FOR AN IMPROVEMENTS PERMIT IS FALSIFIED, CHANGED, OR THE SITE IS ALTERED, THEN THE IMPROVEMENTS PERMIT AND AUTHORIZATION TO CONSTRUCT SHALL BECOME INVALID. The permit is valid for either 60 months or without expiration depending upon documentation submitted. (Complete site plan = 60 months; complete plat = without expiration)

APPLICANT INFORMATION

____Applicant _____Address _____Phone

____Owner _____Mailing Address _____Phone

PROPERTY INFORMATION

Date originally deeded and recorded: _____

____Street Address _____Subdivision Name _____Section/Phase/Lot# _____Lot size

Directions to site: _____

Development Information	Residential Specifications
<input type="checkbox"/> New Single-Family Residence	Max number of bedrooms:
<input type="checkbox"/> Expansion of Existing System	Max number of occupants:
<input type="checkbox"/> Repair to Malfunctioning Sewage Disposal System	If expansion, current number of bedrooms
<input type="checkbox"/> Non-Residential Type of Structure	Will there be a basement? <input type="checkbox"/> yes <input type="checkbox"/> no
<input type="checkbox"/> Recertification	Plumbing fixtures in basement? <input type="checkbox"/> yes <input type="checkbox"/> no

NON-RESIDENTIAL SPECIFICATION

Type of business: _____ Total square footage of building: _____
Maximum number of employees: _____ Maximum of seats: _____

WATER SUPPLY: Are there any existing wells, springs, or existing waterlines on this property? yes no
 New well Existing Well Community Well Public Water Spring

If applying for Authorization to Construct: Please indicate desired system type(s):

Accepted Alternative Conventional Innovative Other _____ Any

The Applicant shall notify the local health department upon submittal of this application if any of the following apply to the property in question. If the answer to any question is "yes", applicant must attach supporting documentation.

- yes no Does the site contain any existing wastewater systems?
- yes no Does the site contain any jurisdictional wetlands?
- yes no Is any wastewater going to be generated on the site other than domestic sewage?
- yes no Is the site subject to approval by any other public agency?
- yes no Are there any easements or right of ways on this property?

I have read this application and certify that the information provided herein is true, complete and correct. Authorized county and state officials are granted right of entry to conduct necessary inspections to determine compliance and applicable laws and rules. I understand that I am solely responsible for the proper identification and labeling of all property lines and corners and making the site accessible so that a complete site evaluation can be performed.

Property owner's or owner's legal representative signature (required)

Date