



Municipality of Dysart et al
 Building Department
 135 Maple Avenue, Box 389
 Haliburton, Ontario, K0M 1S0
 Tel.: (705) 457-1740 Fax: (705) 457-1964
 Website: www.dysartetel.ca

OFFICE USE ONLY	
Fee:	\$250.00
Fee Receipt Number:	
Date Fee Received:	

Application for a Review of Sewage Disposal System Requirements for Building Additions, Renovations, and Additional Buildings

Owner: _____ Phone: _____

Address: _____
 (number) (street) (city, town, etc.) (postal code)

E-mail Address: _____

Township Lot #: _____ Concession #: _____ Township: _____

Plan #: _____ Sub Lot #: _____ Lot Size: _____ Civic (Emergency, Fire, 911) or Roll # _____

Street: _____

Type of Building: _____
 (single family dwelling, seasonal dwelling, type of business)

Water Supply: Drilled Well (Depth of Casing _____ metres)
 Dug or Bored Well _____ Other _____

Describe proposed changes:

Building floor plan and a site plan is required **Existing Sewage Disposal System**

What type of sewage system is serving the premises? _____

What year was the system installed? _____ Owner at time: _____ File Number: _____

Please attach a copy of the **Installation Report/Use Permit** issued for your existing system. We can also search our records for the information. Our records date back to approximately 1974. If the record of your sewage system is not available and if there is an increase in sewage flow, it will be presumed that the system is not up to Code and a new system will be required. Alternatively, the applicant may engage the services of an engineer (with a BCIN#) to conduct a study on the sewage system for which a permit does not exist. If the system is found to meet all the requirements of the Ontario Building Code, the existing system may be accepted. Contact your Sewage System Inspector to discuss further. A decrease in the "performance level" beyond the capacity of any component in the system would require compensating construction (upgrading).

Existing Use (number of bedrooms and fixtures in the dwelling, prior to renovation/ addition)

State the number of:	Bedrooms	Showers & Bathtubs	Wash Basins	Laundry Units	Toilets	Kitchen Sinks	Hot Tubs*	Swimming Pools*	Water Treatment Devices*

Total Area of Living Space on Property (includes guest cabins, bunkies, etc.) _____ m²

Proposed Use (number of bedrooms and fixtures to be in the building including pre-existing and proposed additions)

State the number of:	Bedrooms	Showers & Bathtubs	Wash Basins	Laundry Units	Toilets	Kitchen Sinks	Hot Tubs*	Swimming Pools*	Water Treatment Devices*

Total Area of Living Space on Property (includes guest cabins, bunkies, etc.) _____ m²

*Note: Items marked with an asterisk should not drain water to a sewage disposal system.