

FEE: \_\_\_\_\_

Application No. \_\_\_\_\_

DATE: \_\_\_\_\_

Inspection Date: \_\_\_\_\_

APPLICATION FOR SEWAGE DISPOSAL SYSTEM PERMIT

Office of the Zoning Officer  
Schroon Lake, NY 12870

The undersigned hereby makes application for a permit to perform the work shown on the drawing accompanying this application and described herein:

Owner \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_

Contractor \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_

Project Location: \_\_\_\_\_

Tax Map No. \_\_\_\_\_ Intended Use: Commercial ( )  
Residence ( )

Number of Bedrooms \_\_\_\_\_ (A) Soil Percolation Rate \_\_\_\_\_ Min. for 1" fall

(B) Depth - Seasonal High Ground Water \_\_\_\_\_ (C) Depth - impervious layer \_\_\_\_\_  
(A, B, C to be completed for all locations unless plans have been approved by N.Y.S. Department of Health.)

SEPTIC TANK Size \_\_\_\_\_ Gallons. LIFT PUMP Required (yes/no) \_\_\_\_\_

ABSORPTION (TILE) FIELD - Total length of absorption trench (2 ft. wide) \_\_\_\_\_

SEEPAGE PITS (cesspool/beehive) - # of Pits \_\_\_\_\_ Diameter \_\_\_\_\_ Depth \_\_\_\_\_

NOTE: ALTERNATE SYSTEM Disposal Designs require N.Y.S. Department of Health Approval.

STATE OF NEW YORK )  
COUNTY OF ESSEX ) SS:

\_\_\_\_\_ being duly sworn, disposes and says:  
\_\_\_\_\_ is the owner in fee of the premises to which this application applies; that he/she (the applicant) is duly authorized to make this application; and that the statements contained herein are true to the best of his/her knowledge and belief.

\_\_\_\_\_  
Signature of Applicant

Sworn to me this \_\_\_\_\_  
day of \_\_\_\_\_

\_\_\_\_\_  
Notary Public

	D W E L L I N G		M E A N H I G H W A T E R		P R O P E R T Y		S E A S O N A L H I G H		I M P E R V I O U S L A Y E R	
		W E L L	L A K E, S T R E A M, E T C.		L I N E		G R O U N D W A T E R		O R L E D G E	
SEPTIC TANK	10'	50'	50'		10'		--		--	
DISTRIBUTION BOX	20'	100'	100'		10'		--		--	
ABSORPTION (TILE) FIELD	20'	100'	100'		10'		2'		5'	
SEEPAGE PITS (CESSPOOL)	20'	150'	100'		10'		2'		5'	
SANITARY PRIVY PIT	25'	100'	50'		15'		2'		5'	

SEE: TOWN OF SCHROON "REGULATION FOR INDIVIDUAL SEWAGE DISPOSAL SYSTEMS" FOR ADDITIONAL REQUIREMENTS