

**(Repairs, Addition/Modifications, Existing Systems)**

Property Owner's Name (*Please Print*):

Property Owner's Address (*Please Print*):

STREET

CITY

STATE

ZIP

Owner's Phone #: \_\_\_\_\_ Owner's Email: \_\_\_\_\_

Site/Construction Address:

STREET

CITY

STATE

ZIP

Authorized Agent (*Other than Property Owner*) (*Please Print*):

Agent's Phone #: \_\_\_\_\_ Agent's Email: \_\_\_\_\_

Subdivision Name (*If Applicable*): \_\_\_\_\_ Lot #: \_\_\_\_\_

Lot Size/Acreage: \_\_\_\_\_ Gate Code #: \_\_\_\_\_

Water Supply:  Public Water  Individual Well Animals to be aware of on Property  Yes or  No

Are there any abandoned or inactive wells on the property?  Yes or  No

I hereby apply for a construction permit to install an On-Site Sewage Management System and agree that the system will be installed to conform to the requirements of the rules of the Georgia Department of Public Health, Chapter 511-3-1. By my signature, I understand that final inspection is required and will notify the County Health Department upon completion of construction and before applying final cover material to the system.

Owner/Agent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**(2) Repair Permit:** Age of System: \_\_\_\_\_ # of Bedrooms \_\_\_\_\_

Failure Symptoms:  Backing up in Home  Surfacing at Tank  Surfacing in Yard

Other \_\_\_\_\_ Do you have a garbage disposal  Yes or  No

**(3) Addition/Modification Permit:** Current # of Bedrooms \_\_\_\_\_

Reason for Modification:  Tank Relocation  Field Line Modification

Bedroom Addition # of Additional Bedrooms being added \_\_\_\_\_

Do you have a garbage disposal  Yes or  No

**(4) Existing System Evaluation:**

Reason for Evaluation:  Financial  Mobile Home Relocation  Swimming Pool Construction

Commercial Bldg.- Occupancy Load (please *include*) # of Employees \_\_\_\_\_

New Construction (On Existing System)  Other \_\_\_\_\_

Structure(s) Addition to Property: \_\_\_\_\_  
(List type of Structure)

Home Addition: \_\_\_\_\_  
(List type of addition)

Current # of Bedrooms \_\_\_\_\_ Do you have a garbage disposal  Yes or  No