

LASSEN COUNTY PLANNING AND BUILDING SERVICES DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

707 NEVADA STREET, SUITE 5, SUSANVILLE, CA 96130

▪ Phone: (530) 251-8269

▪ Fax: (530) 251-8373

APPLICATION for SEWAGE DISPOSAL PERMIT

NOTE: THIS IS NOT A PERMIT TO INSTALL A SEPTIC SYSTEM. The Lassen County Department of Planning and Building Services will issue a building permit for the proposed application.

ASSESSOR'S PARCEL NUMBER	PHYSICAL ADDRESS	PERMIT NUMBER
--------------------------	------------------	---------------

Deed Reference: Book: _____ Page: _____ Year: _____ Doc# _____

To Be Completed By Owner Or Authorized Agent

Permit Expires One (1) Year from Date of Issue

PROPERTY OWNER'S NAME	PROPERTY OWNER'S PHONE NUMBER
PROPERTY OWNER'S MAILING ADDRESS	PROPERTY OWNER'S EMAIL

CONTRACTOR	CONTRACTOR'S LIC. NUMBER
CONTRACTOR'S MAILING ADDRESS	CONTRACTOR'S PHONE NUMBER
	CONTRACTOR'S EMAIL

TYPE OF PREMISE	WATER SUPPLY
<input type="checkbox"/> Commercial <i>Specify:</i> _____ <input type="checkbox"/> Other <i>Specify:</i> _____	<input type="checkbox"/> Public <i>Specify:</i> _____
<input type="checkbox"/> Dwelling <input type="checkbox"/> Manufactured Home No. Living Units: _____ Bedrooms: _____ Baths: _____	<input type="checkbox"/> Private <i>Specify:</i> _____

Note: All leach lines must be installed using a transit level, engineer's level, laser, level, or equivalent.
Leach gravel must be graded 1 ½ - 3 inches washed.

In the event that unsuitable conditions (i.e., excessive or consolidated rock, hardpan, water, etc.) or questionable material is encountered during excavation; **STOP WORK IMMEDIATELY** and contact the Environmental Health Division

THIS APPLICATION MUST BE ACCOMPANIED BY A SITE PLAN SHOWING THE ENTIRETY OF THE LEGAL PARCEL AND THE FOLLOWING: location of proposed well, existing/proposed sewage disposal systems, property lines, easements other existing wells, animal enclosures, access roads, overhead power, fuel tanks (above or below ground), drainages, water courses, springs, creeks, rivers, etc. Indicate northerly direction, label adjacent roads, and label distances from the proposed sewage disposal system to all property lines, water systems, and buildings. See the Department's "Sample Site Plan and Instructions" for further information on site plan requirements.

***Valuation of Project:** _____

I hereby certify that I have prepared this application and that the installation will be done and inspected in accordance with the Lassen County Ordinances and State Laws.

Signed: _____ Date: _____

Print Name: _____

Owner
 Agent (Authorization form or letter attached)
 Contractor

PERCOLATION	SEPTIC TANK
Percolation Test Performed: <input type="checkbox"/> No <input type="checkbox"/> Yes By: _____	Tank Size in Gallons: _____
Results: _____ min./in. Date: _____	Material Constructed of: _____

SEWAGE DISPOSAL FIELD	
Distance from Well: _____ Feet Distance from Water Source: _____ Feet Distance from Lot Line: _____ Feet Distance from Centerline of County Road: _____ Feet <input type="checkbox"/> Chambers <input type="checkbox"/> Rock and Pipe <input type="checkbox"/> Other <i>Specify:</i> _____ Required Distribution Box must be set in Concrete: <input type="checkbox"/> Yes <input type="checkbox"/> N/A	Length of Each Line: _____ Feet Total Length of Leach Lines: _____ Feet Width of Trench: _____ Feet Depth of Trench: _____ Feet Depth of Gravel Beneath Leach Pipe: _____ Inches Depth of Gravel over leach Pipe: _____ Inches

Zoning District: _____

Flood Plain Information: _____

Elevation Certificate required: Yes No

Engineered Plans/Flood Proofing required: Yes No

Plot Plan Adequate

Incremental Development Proposed: Yes No Details: _____

Parcel size (acreage): _____

Parcel Map/Subdivision Map: exclusion areas, designated leach field areas, etc. (attach Map if pertinent): _____

Required Setbacks (if any portion located more that twelve inches above grade): _____

Legal parcel per Subdivision Map Act section 66499.34 and County Code section 12.24.025 Yes No
Details: _____

Other (easements, waste discharge prohibition areas, etc.) : _____

Based on the above information, the applicant's/property owner's/contractor's application has been reviewed by the Planning Division and now needs to be reviewed by the Environmental Health Division.

Signature of Authorized Official: _____ Date: _____

Print Name: _____

NOTE: APPROVAL OF THE ENVIRONMENTAL HEALTH DIVISION IS NOT A GUARANTEE THAT THE PROPOSED INSTALLATION WILL OPERATE SUCCESSFULLY, BUT MERELY THAT THE SYSTEM MEETS THE MINIMUM REQUIREMENTS OF THE ENIRONMENTAL HEALTH DIVISION.

APPROVED APPROVED WITH CONDITIONS BACTERIOLOGICAL SAMPLE REQUIRED

Issued By: _____, E.H.S. Date: _____

Final Inspection By: _____, _____ Date: _____ Remarks/Conditions: _____