

MCCULLOCH COUNTY
APPLICATION FOR ON-SITE SEWAGE FACILITY
NEW CONSTRUCTION AND/OR MODIFICATION

_____ New Installation
_____ Modification

Application # _____
Date _____
Amount _____

Property Owner's Name: _____
(Last) (First) (Middle)

Phone number during the day: _____

Mailing Address: _____

Site Address: _____

Legal Description: Sec. _____ Block _____ Lot _____ Date _____

Subdivision _____

Other than Subdivision: Acreage _____ Survey _____

Source of Water _____ Private Well _____ Public Water Supply _____

(Name of Supplier) _____

Single Family Residence: No. of Bedrooms _____ Square Ft. _____

Commercial/Institutional (Including multi-family residence) _____

Type: _____

Number of Employees/Occup./Units _____ Days Occupied per Week _____

Site Evaluator: _____ License # _____

Designer: _____ License # (PE or RS) _____

Phone #: _____

Installer: _____ License # _____

Type of Disposal System: _____ Absorptive Mount _____ Drip Irrigation _____

_____ Evapotranspiration Beds _____ EZflow Systems _____ Gravelless Pipe _____

_____ Leaching Chambers _____ Low Pressure Dosing _____ PTI Systems _____

_____ Pumped Effluent _____ Standard Trenches/Beds _____ Surface Applications _____

I certify that the above statements are true and correct to the best of my knowledge.
Authorization is hereby given to the McCulloch County On-Site Sewage Agent to enter upon the above described property for the purpose of lot evaluation and inspection of on-site sewage facility and that a permit to operate the facility will be granted following successful inspection of the installed system.

Signature of Owner

Date