

SEWAGE SYSTEM APPLICATION CHECKLIST - Performance review

This application will require the bolded items listed below.

- 1) Fee payment of \$515.00 (cash, debit or cheque)
- 2) Completed Review of Performance Level application package:
 - a) Performance review application page
 - b) Existing and proposed Daily Design Sewage Flow (Schedule 1)
 - c) Plot/site plan showing distances from all lot lines, high water mark, overhead power lines and all buildings (Schedule 2)
 - d) Floor plan layout of all floors of the dwelling labeled with use (ie: bedroom, kitchen) and list the type of plumbing fixture(s) per room (ie: sinks, toilets, tubs/showers)
 - e) Agent Authorization letter
- 3) A separate calculation page will be required if the sewage system includes non-residential occupancies
- 4) Copy of Tax bill or Deed (proof of land ownership)
- 5) Survey of property (upon request)
- 6) Site Plan or Development Agreement (if required from Planning Services)

The reason for the review of performance level of the existing on-site sewage system is:

MINOR VARIANCE APPLICATION:

BUILDING ADDITION: Bedrooms Plumbing fixtures Living space

CHANGE OF USE or OCCUPANCY: Residential to Non-Residential
Non-Residential to Other Non-Residential

Directions to lot or property address:



Application for Review of Performance Level of an Existing On-Site Sewage System

For Office Use Only	
Application number:	Permit number:
Date received:	Roll number:

Application submitted to: Township of North Frontenac

A. Address of existing on-site sewage system:					
Civic #, Street name, Town:					
Municipality:			Province: ON Postal Code:		
B. Applicant information:					
Last name:		First name:		Corporation or partnership:	
Civic #, Street name, Town:					Unit #:
Municipality:		Postal code:	Province:	E-mail:	
Phone #:			Cell #:		
C. Owner (if different from applicant):					
Last name:		First name:		Corporation or partnership:	
Civic #, Street name, Town:					Unit #:
Municipality:		Postal code:	Province:	E-mail:	
Phone #:			Cell #:		
D. Declaration of applicant:					
I, _____ declare that:					
(Print name)					
<ol style="list-style-type: none"> 1. The information contained in this application, attached schedules, attached plans and specifications and other attached documentation is true to the best of my knowledge. 2. I have the authority to bind the corporation or partnership (if applicable). 3. Permission is hereby granted to the relevant staff to enter the premises subject to this application for the purposes of making inspections associated with this application, during normal and reasonable working hours. 					
Date _____			Signature of applicant _____		