

POTTAWATTAMIE COUNTY, IOWA APPLICATION FOR SEPTIC PERMIT

GENERAL INFORMATION		WHEN PERMITS ARE READY		<input type="checkbox"/> Mail them <input type="checkbox"/> Call me <input type="checkbox"/> Call the septic contractor <input type="checkbox"/> Email me <input type="checkbox"/> Email the septic contractor				
		PROPERTY OWNER	Name					
Mailing Address	Street				City, State, Zip			
Contact Information	Email				Home # <input type="checkbox"/>	Work # <input type="checkbox"/>	Cellular <input type="checkbox"/>	
		<input checked="" type="checkbox"/> Best Way to Contact						
APPLICANT (if other than property owner)	Name							
	Mailing Address	Street			City, St, Zip			
	Contact Information	Email			Home # <input type="checkbox"/>	Work # <input type="checkbox"/>	Cellular <input type="checkbox"/>	
		<input checked="" type="checkbox"/> Best Way to Contact						
PROPERTY INFORMATION	Job Site Address	<input type="checkbox"/> Same as above #1 <input type="checkbox"/> To be assigned by Planning Dept.						
	Civil Township			Parcel Number				
	Legal Description	<input type="checkbox"/> Per Attachment						
SEPTIC INSTALLER	Name				County Registration#			
	Mailing Address	Street			City, State, Zip			
	Contact Information	Email			Work # <input type="checkbox"/>	Cellular <input type="checkbox"/>		
		<input checked="" type="checkbox"/> Best Way to Contact						
DESIGN BASIS	System to Serve	<input type="checkbox"/> New Structure <input type="checkbox"/> Existing Structure						
	Structure Type	<input type="checkbox"/> Single-Family Dwelling with _____ bedrooms <input type="checkbox"/> Other _____, which has an estimated utilization of _____ gpd.						
	Water Supply	<input type="checkbox"/> Private Water Well <input type="checkbox"/> Public Water System <input type="checkbox"/> Public Water Well						
	Percolation Rate			Soil Loading Rate				
SEPTIC PERMIT	SEPTIC SYSTEM DESIGN	<input type="checkbox"/> Septic Tank		Minimum	Existing	Proposed		
		A. Gallons						
		B. Compartments	2					
		C. Material Type						
		D. Tank Manufacturer						
		<input type="checkbox"/> Laterals with Gravel		Minimum	Existing	Proposed		
		A. Total Length						
		B. # of Lines/Footage Each Line						
		C. Trench Width	<input type="checkbox"/> 24" <input type="checkbox"/> 36"				<input type="checkbox"/> 24" <input type="checkbox"/> 36"	
		D. Rock Depth Under Pipe	<input type="checkbox"/> 6" <input type="checkbox"/> 12"*** <input type="checkbox"/> 18"*** <input type="checkbox"/> 24"***				<input type="checkbox"/> 6" <input type="checkbox"/> 12"*** <input type="checkbox"/> 18"*** <input type="checkbox"/> 24"***	
		<input type="checkbox"/> Laterals-Gravelless/Chamber		Minimum	Existing	Proposed		Pipe Type
		A. Total Length						<input type="checkbox"/> 8" gravelless <input type="checkbox"/> 10" gravelless
		B. # of Lines/Footage Each Line						<input type="checkbox"/> 24"<Chamber <input type="checkbox"/> 33">Chamber
<input type="checkbox"/> Other-Design Attached		Type of System:						

****Utilization of this depth of rock requires approval from the Office of Planning and Development.**

ATTACHED TO THIS APPLICATION IS THE FOLLOWING DOCUMENTATION AND/OR ATTACHMENTS:

- | | Attached | NA |
|---|--------------------------|--------------------------|
| A. Site Plan, Drawn to Scale | <input type="checkbox"/> | <input type="checkbox"/> |
| B. Site Plan Check List | <input type="checkbox"/> | <input type="checkbox"/> |
| C. Percolation Test Results or Soils Analysis | <input type="checkbox"/> | <input type="checkbox"/> |
| D. Recorded Service Maintenance Agreement for Media Filter/Aerobic Treatment Systems
(Document prepared by County) | <input type="checkbox"/> | <input type="checkbox"/> |
| E. Filing Fee – Checks are to be made payable to “Pottawattamie County Treasurer”. | <input type="checkbox"/> | <input type="checkbox"/> |
| F. City approval if system will be installed in the corporate limits of a city | <input type="checkbox"/> | <input type="checkbox"/> |

SIGNATURES	I certify that I have personally been to this property, reviewed the proposed development and acknowledge that the proposed construction of the SEPTIC SYSTEM will be able to be accomplished in accordance with the Onsite Wastewater Treatment and Disposal System Ordinance of Pottawattamie County, Iowa.	
	Commercial Septic Installer	Date
	Signature	
	Type or Print Name	
SIGNATURES	I certify that I own this property and that the information contained in this application is true and correct to the best of my knowledge and that all work will be completed in accordance with the Pottawattamie County, Iowa, Code.	
	Property Owner	Date
	Signature	
	Type or Print Name	

INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED

DO NOT START CONSTRUCTION UNTIL PERMITS ARE RECEIVED IN THE MAIL AND PLACARDS ARE POSTED.

FAILURE TO WAIT FOR PERMITS AND POST PLACARDS WILL CAUSE YOU TO HAVE TO PAY AN INVESTIGATION FEE, WHICH IS DOUBLE THAT OF ANY PERMIT FEES YOU PAY. ADDITIONALLY, FAILURE TO OBTAIN PERMITS PRIOR TO STARTING CONSTRUCTION COULD RESULT IN THE ISSUANCE OF A CITATION OF COUNTY INFRACTION. OUR GOAL IS TO HAVE PERMITS OBTAINED PRIOR TO CONSTRUCTION STARTING. PLEASE HELP US ATTAIN THIS GOAL BY APPLYING FOR AND OBTAINING YOUR PERMITS BEFORE STARTING YOUR CONSTRUCTION.

RETURN COMPLETED FORM TO OBTAIN PERMIT PRIOR TO STARTING CONSTRUCTION:

POTTAWATTAMIE COUNTY * PLANNING AND DEVELOPMENT
223 SOUTH 6TH STREET
COUNCIL BLUFFS, IA 51501-4245

IF YOU HAVE ANY QUESTIONS ON COMPLETING THIS FORM, PLEASE FEEL FREE TO CALL (712) 328-5792.

Scaled Drawings for Permits shall show the following
Complete this form in addition to application and site plan

Shown on Plan	Not Applicable	
<input type="checkbox"/>	<input type="checkbox"/>	Shape and dimensions of the property
<input type="checkbox"/>	<input type="checkbox"/>	Location and size of Existing structures
<input type="checkbox"/>	<input type="checkbox"/>	Location of Well & septic corridor boundaries (only for those subdivisions where they have been established at the time of final plat)
<input type="checkbox"/>	<input type="checkbox"/>	Percolation test holes and bore hole
<input type="checkbox"/>	<input type="checkbox"/>	Proposed septic tank and absorption area
<input type="checkbox"/>	<input type="checkbox"/>	Private water well(s) on-site and/or within 100' of property boundaries
<input type="checkbox"/>	<input type="checkbox"/>	Public water well(s) on-site and/or within 400' of property boundaries
<input type="checkbox"/>	<input type="checkbox"/>	Groundwater heat pump bore holes on-site and/or within 100' of property boundaries
<input type="checkbox"/>	<input type="checkbox"/>	Drainage wells on-site and/or within 1000' of property boundaries
<input type="checkbox"/>	<input type="checkbox"/>	Lakes or reservoirs on-site and/or within 100' of property boundaries
<input type="checkbox"/>	<input type="checkbox"/>	Streams or ponds on-site and/or within 25' of property boundaries
<input type="checkbox"/>	<input type="checkbox"/>	Drainage ditches on-site and/or within 10' of property boundaries

ALL PROPOSED IMPROVEMENTS AND ANY SUBSURFACE EXISTING IMPROVEMENTS (FOR EXAMPLE SEPTIC SYSTEM) SHALL BE STAKED, FLAGGED AND IDENTIFIED APPROPRIATELY. (SEPTIC TANK FLAG MARKED “SEPTIC TANK”, WELL FLAG MARKED “WELL” AND SO ON.