



Township of North Kawartha
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OFFICE USE ONLY
Fee: \$225.00
Date Fee Received: _____

Application for a Review of Sewage Disposal System Requirements for Building Additions, Renovations and Additional Buildings

Owner: _____ Phone: _____

Mailing Address: _____
(number, street, city, town, etc. and postal code)

Email Address: _____ Property Size: _____

Property Address: _____
(number, street, city, town, etc. and postal code)

Type of Building: _____
(single family dwelling, seasonal dwelling, type of business)

Water Supply: Drill Well (Depth of Casing _____ metres)

Dug or Bored Well _____ Lake _____ Other _____

Describe proposed changes:

Building Floor Plan and a Property Site Plan is Required

Existing Sewage Disposal System

What type of sewage system is serving the premises? _____

What year was the system installed? _____

Owner at the time: _____ File Number: _____

Please attach a copy of the **Installation Report/Use Permit** issued for your existing system. We can also search our records for the information. Our records date back to approximately 1974. If the record of your sewage system is not available and if there is an increase in sewage flow, it will be presumed that the system is not up to Code and a new system will be required. Alternatively, the applicant may engage the services of a Qualified Sewage System Designer/Installer (with a BCIN) to conduct a study on the sewage system for which a permit does not exist and verified by this Building Department. If the system is found to meet all the requirements of the Ontario Building Code, the existing system may be accepted. Contact your Sewage System Inspector to discuss further. A decrease in the "performance level" beyond the capacity of any component in the system would require compensating construction (upgrading).

Existing Use (number of bedrooms and fixtures in the dwelling prior to renovation/addition)

State the number of:

Bedrooms	Showers & Bathtubs	Wash Basins	Laundry Units	Toilets	Kitchen Sinks	Water Treatment Devices*

Total Area of Living Space on Property (including guest cabins, bunkies, etc. _____m²)

Proposed Use (number of bedrooms and fixtures to be in the building including pre-existing and proposed additions)

State the number of:

Bedrooms	Showers & Bathtubs	Wash Basins	Laundry Units	Toilets	Kitchen Sinks	Water Treatment Devices*

Total Area of Living Space on Property (including guest cabins, bunkies, etc. _____m²)

*Note: Items marked with an asterisk should not drain water to a sewage disposal system.

Signature

Date