



Pomperaug District Department of Health

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Rec # _____
Date _____
\$ Amount _____
Rec'd By _____

APPLICATION FOR PERMIT TO CONSTRUCT / REPAIR A SEWAGE DISPOSAL SYSTEM

Note: This is not a Permit to Construct a Sewage Disposal System

PLEASE PRINT - All Applications Must Be Complete For Proper Processing

Property/Owner

Lot # _____ Street _____ Town _____
Owner _____ Tel # _____
Address _____
Street _____ Town _____ Zip _____

Installer

Name _____ License _____ Phone # _____
Address _____
Street _____ Town _____ Zip _____

System

____ New Construction

____ Repair (Existing)

____ Tank Replacement Only

Property

____ Residential

____ Commercial

____ # of Bedrooms

Tank/Leaching Fields

Tank Size _____

Type of Leaching System _____

Effective Area (sq ft) _____

Water Supply

____ Well ____ Public

Design Criteria

- Approved engineer designs must be on file prior to permit application.**
- All* permit applications must have a plan approval, which includes a sketch of the proposal showing the house, well locations and septic system details, etc.**

FEES:

Residential: \$400 New
\$225 Repair

Commercial: \$550 for first 1000 gal. daily flow
\$350 for each additional 1000 gal. daily flow

Signature of Licensed Installer

Date