Permit	#
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# WASTEWATER SYSTEM PERMIT

Cherokee County Clerk
PO Box 14
Columbus, KS 66725
vqualls@cherokeecounty-ks.gov | (620)-304-3031

### **APPLICANT INFORMATION**

	_ Reconstruction	New Installation	
Type of System: Conventional	Lagoon	Other (Specify)	
Applicant Name:			
Current Address:		City/State/Zip:	
Site Address:		City/State/Zip:	
Phone Number (Home):		(Cell):	
Type of Occupancy:			
Residential Acreage:	Number of Bedrooms:		
> Commercial Type:	Acreage:	Number of People:	
*Are there any additional water us breakfast, beauty shop, etc.? Yes /		to consider, such as: home business, day care, bed &	
If yes, explain:			
I certify that the above information with the Environmental Code.	n is correct, and the	proposed system will be completed in accordance	
Applicant Signature:		Date:	
	Permi	t Fees:	
	Reconstruction:	\$30	
	New Installation:	\$40	

#### DISCLAIMER OF LIABILITY

This permit shall not be construed or interpreted as imposing upon Cherokee County, or employees any liability or warranty that any system installation, or portion thereof, that is constructed, or repaired under the Cherokee County Environmental Code will function properly.

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## **INSTALLATION INFORMATION:**

# PROVIDE A DETAILED DRAWING OF THE ENTIRE PROPEOSED WASTERWATER SYSTEM, INCLUDING SEPERATION DISTANCES AND RELEVANT DIMENSIONAL INFORMATION FROM A LICENSED CONTRACTOR.

\*\*\*REVISIONS TO ORIGINAL PLAN MUST BE APPROVED PRIOR TO INSTALLATION.\*\*\*

Gallon Septic Tank (Ma	anufacturer):	
Trench Width	Linear Ft. of Laterals	Total Sq. Ft.
• Lagoon Classification (	(M-Size)	
• Distance from System t	to Property Line (10' Min/Lagoon 50' N	Min.):
• Distance from System t	to Dwelling Foundation (20' Min/Lago	on 50' Min):
• Distance from System t	to Private Water Line (10' Min):	
• Distance from System t	to Public Water Line (25' Min):	
• Distance from System t	to Area Wells (100' Min):	
SYSTEMS, RECIRCUL	HAMBER SYSTEMS, DRIP DISTRIBUTION, ATION SAND FILTER, EVAPOTRANSPIRA UNITY SYSTEM WILL BE SUBJECT TO SPI	TION, WETLAND AND
I certify that the above information is c	correct and that the proposed work will be completed. Cherokee County Environmental Code.	ted in accordance with this plan and the
Contractor Name:	Contractor Signature:	Date:
Approved By:	Date:	Permit #: