OSSF Technical Information Sheet

Project Address: _____

Owner's Name: _____

Professional Design required? **Yes** **No** If yes, attached? **Yes** **No**

Sewer (House Drain)

Type and size of pipe: _____

Slope of sewer pipe to tank: _____

Daily Wastewater usage rate: Q= _____ (Gallons/Day)

Treatment Unit

A.) Septic Tank: Dimensions: _____

Liquid Depth (Tank bottom to outlet) _____

Size Required _____ Size Proposed _____

B.) Aerobic: Pretreatment Tank? Yes No

Manufacturer _____ Model # _____

Size Required _____ Size Proposed _____

Disposal System:

Type: _____ Loading Rate: _____

Additional Information (This material must be attached for review to be completed)

Site Evaluation Scaled site drawing to include spray area

Pump Alarm Diagram Filed Affidavit

Construction is not permitted until application is approved and a permit is issued. Unauthorized construction can result in Civil and/pr Administrative Penalties.

_____ _____ _____

Designer's Signature Reg. # Date