## Saskatchewan Health Authority

## **Municipal Plumbing Permit Application**

M181252

City, Town or Village  City, Town or Village  C.M. # Section Township  Plumber / Sewage Works Installer  Address Phone #  Permit Applicant Address Phone #  Plumbing System —Number of fixtures to be installed  itchen Sinks Shower Stalls Shower Stalls Shasins Laundry Tubs Showshers Laundry Tubs  // Ash Basins Laundry Tubs Shower Stalls Shower Oranis (No Charge) Urinals  Ito part of the plumbing system or private sewage works shall be covered to	Drinking For Laboratory Clothes War Other	ountains Sinks ashers (no Charge)	granted by the				
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Shower Stalls  ath Tubs  Dishwashers  Laundry Tubs  Jordarer Closets  Slop Sinks  Urinals  Dishwashers  Laundry Tubs  Slop Sinks  Urinals  Detailed site plan to be provided on reverse side of public health officer copy)	Laboratory Clothes Wa Other	Sinks ushers (no Charge) permission is §	granted by the				
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No part of the plumbing system or private sewage works shall be covered Authority.  Permit Fee  Total # of Fixtures  Private Sewage Works  Septic Tank	ered until j						
Septic Tank Holding Tank Mound Field Other Detailed site plan to be provided on reverse side of public health officer copy)			cc				
Connection to pipeline system as described in S.7 of The Plumbing Regulations		F	ee \$				
		F	ee \$				
		Т	Total \$				
Plumbing Permit							
Permission is hereby granted for the works indicated above	Date						
Municipality		Fee Received \$					
Signature of Municipal Official							
To be Completed by Public Health Officer	Sasl	katchewan He	ealth Authority				
Date(s) Inspected							
Approved							

## SITE PLAN DIAGRAM

## DETAILS TO BE INCLUDED:

- 1. Property: size dimensions, boundaries
- 2. Location and distances of the tank and/or private sewage works from:

  - a) all wells on that property or adjoining properties;
    b) all buildings on that property or occupied dwelling on adjoining properties;
  - c) all water courses/sources within 0.5 kilometer;
  - d) all boundaries of that property;

NOTE: A PERCOLATION TEST MAY BE REQUIRED TO BE PERFORMED CONTACT YOUR LOCAL PUBLIC HEALTH OFFICER



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