



TOWN OF RIDGEFIELD

Health Department

Application for Permit to Construct a Sewage Disposal System

Application is hereby made for the permit to construct a sewage disposal system for a:

Residence Office Restaurant Store Accessory Building
Other

SITE ADDRESS: Lot # Tax Assessor #

Street Address:

TYPE OF SYSTEM: New Repair Tank Replacement B-100a
Other

REASON for repair, B100a, or tank replacement, etc.:

Owner's Name Phone ()

Address

Installer's Name Phone ()

Address

City State Zip

License #

Engineer's Name Phone ()

Address

City State Zip

License #

In accordance with detailed information below

Signed Date

(Installer, Engineer or Property Owner)

NOTE: If a pump system is required, the installer MUST secure the services of a licensed electrician to take out a permit with the Building Department.

APPLICANT MUST CHECK ALL APPLICABLE BOXES

Subdivision approved: yes no If yes, date Lot Size Ac.
Check which is applicable: Watershed Wetlands Flood Zone Footing Drains Basement Fixtures
Water supply type: Private Well Community Well Public Water
Design Basis: Residential # of Bedrooms Non-Residential GPD