



**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: # \_\_\_\_\_ Street Address: \_\_\_\_\_

Type of System: ☐ New (ie. Lots or changing footprint) ☐ Repair ☐ Tank Replacement  
☐ Demonstrating Reserve (B100) ☐ Other \_\_\_\_\_

Reason for repair, B100a or tank replacement, etc. \_\_\_\_\_

Owner's Name \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_  
Address \_\_\_\_\_ Town \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Email Address \_\_\_\_\_

Installer's Name \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_  
Address \_\_\_\_\_ Town \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
License # \_\_\_\_\_ Email Address \_\_\_\_\_

Engineer's Name \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_  
Address \_\_\_\_\_ Town \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
License # \_\_\_\_\_ Email Address \_\_\_\_\_

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      Date \_\_\_\_\_      Lot Size \_\_\_\_\_ Ac.  
Watershed ☐      Wetlands ☐      Flood Zone ☐      Foundation Drains ☐  
Water Supply: ☐ Private Well      ☐ Community Well      ☐ Public Water  
Design Basis: Residential ☐      # of Bedrooms \_\_\_\_\_  
                                 Non-Residential ☐      \_\_\_\_\_ GPD Flow  
Date Sewer Scheduled \_\_\_\_\_  
Basement Fixtures ☐

66 Prospect Street - Ridgefield, Connecticut 06877 - (203) 431-2745

[www.ridgefieldct.org](http://www.ridgefieldct.org)