

## "A Place For All Seasons"

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8 Hastings Heritage Way, P. O. Box 790, Bancroft, Ontario KOL 1CO

## Application for a Review of Sewage Disposal System Requirements for Building Additions, Renovations, and Additional Buildings

Owner:	Phon		one:	e: En		nail:	
Address:							
	(number)	(street)	(city, to	own, etc.)		(postal code)	
Property Info							
Township:		Concession	#: Townshi	p Lot #:	Plan #:	_Sub Lot #:	
Address or R	oll #:		Type of Building: (single family house, cottage, duplex, or type of business)				
Matar Suppl	Drillad V	Vall (Danth of Casin	g mot				
water Supply	: Drilled Well (Depth of Casing metres) Dug or Bored Well						
	Other (lake, spring, etc.)						
Describe pro	posed chan	ges (A building layo	ut and/or a site pl	an may be r	equired):		
		Exis	ting Sewage Disp	osal System			
What type of	f sewage sys	stem is serving the p	oremises?				
What year was the system installed? Owner at time: File Number: _							
sewage systemot up to Coengineer (wiresystem is four	em is not avoide and a new th a BCIN#) and to meet	ailable and if there w system will be red to conduct a study	is an increase in so quired. Alternative on the sewage sys ts of the Ontario E	ewage flow, ely, the appli tem for whi uilding Code	it will be presume icant may engage ch a permit does re, the existing syst	not exist. If the em may be accepted.	
capacity of a	ny compone	ent in the system w	ould require comp	ensating co	nstruction (upgrad	ding).	
Existing Use							
	Showers & Bathtubs	Wash Toilets Basins	Laundry Units	Kitchen Sinks	Floor Drains (To Septic)	Water Treatment Devices (Type)	
Total area (m	n <sup>2</sup> ) of living s	space on property e	excluding finished	basements (	including guest cabins) _		
			Proposed U	se			
	Showers & Bathtubs	Wash Toilets Basins	Laundry Units	Kitchen Sinks	Floor Drains (To Septic)	Water Treatment Devices (Type)	
Total area (m	2) of living	naco on proporty o	waluding finishad	hacamants (			