



**Lac La Biche County**

P.O. Box 1679  
 LAC LA BICHE AB T0A 2C0  
 Phone: (780) 623 1747  
 Fax: (780) 623 3510  
 www.laclabichecounty.com

**The Inspections Group Inc.**

12010 – 111 Avenue NW  
 Edmonton AB T5G 0E6  
 Phone: (780) 454 5048 Toll Free: (866) 554 5048  
 Fax: (780) 454 5222 Toll Free: (866) 454 5222  
 www.inspectionsgroup.com

**PRIVATE SEWAGE DISPOSAL SYSTEM APPLICATION FORM**

File Number: \_\_\_\_\_

Permit Number: \_\_\_\_\_

Application Date: DD / MMM / YYYY

e-SITE Number: \_\_\_\_\_

Applicant Type:  Homeowner  Contractor

Cost of Installation (Labour & Material)\$ \_\_\_\_\_

The Permit Holder hereby certifies that this installation will be completed in accordance with the Alberta Safety Codes Act. A permit may expire if the undertaking to which it applies: (a) is not commenced within 90 days of issue of the permit, (b) is suspended or abandoned for a period of 120 days. An extension can be considered when applied for in writing prior to permit expiry date.

**Additional inspections are available for an additional fee**

Owner Name: \_\_\_\_\_ Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ Prov: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Cell: \_\_\_\_\_ Email: \_\_\_\_\_

**Owner's Signature / Declaration (Single Family Residential Only)**

"I hereby declare I am the owner of the premises in which the work will be conducted, and reside or will reside on the property. I am doing the work myself, and assume responsibility for compliance with the applicable Act and Regulations"

Company Name: \_\_\_\_\_ Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ Prov: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Cell: \_\_\_\_\_ Email: \_\_\_\_\_

PSDS Installer's Number \_\_\_\_\_ Print Private Sewage Installer's Name \_\_\_\_\_ Installer's Signature \_\_\_\_\_

Project Location in Lac La Biche County: \_\_\_\_\_ Work:  not started  in progress  complete

Street Address: \_\_\_\_\_ Tax Roll #: \_\_\_\_\_

Legal Subdivision: Part of: \_\_\_\_\_ Section: \_\_\_\_\_ Township: \_\_\_\_\_ Range: \_\_\_\_\_ West of: \_\_\_\_\_

Subdivision Name: \_\_\_\_\_ Lot: \_\_\_\_\_ Block: \_\_\_\_\_ Plan: \_\_\_\_\_

**INSTALLATION TYPE:**

- New installation
- Alteration

Expected Volume of Sewage:

- m3 per day
- Litres per day
- Gallons per day

**TYPE OF WORK:**

- Commercial
- Residential
- \_\_\_\_\_ Number of Bedrooms
- Work Camp
- \_\_\_\_\_ Number of Men
- Other \_\_\_\_\_

**TREATMENT / DISPOSAL METHODS (COMPLETE ALL APPLICABLE ITEMS):**

- Treatment Mound
- Sewage Lagoon
- Sand Filter
- Other \_\_\_\_\_
- Disposal Field
- Open (Surface) Discharge
- Packaged Sewage Treatment Plant

Description of Work With Tank Size: \_\_\_\_\_

**COMPLETE THE ATTACHED SITE EVALUATION REPORT.**

Payment Type:  Cash  Cheque  MC  VISA  Interac

Credit Card Number: \_\_\_\_\_ Exp: \_\_\_\_\_

Cardholder Name / Signature: \_\_\_\_\_

Permit Fee: \$ \_\_\_\_\_ + SCC Levy: \$ \_\_\_\_\_

\*\$4.50 or 4% of the permit fee maximum \$560.00

Total Cost: \$ \_\_\_\_\_ Receipt #: \_\_\_\_\_

**OFFICE USE ONLY**

Issuing Officer's Name: \_\_\_\_\_

Designation Number: \_\_\_\_\_

Issuing Officer's Signature: \_\_\_\_\_

Permit Issue Date: DD / MMM / YYYY

**PLEASE CONTACT THE INSPECTIONS GROUP INC. PRIOR TO COVER FOR INSPECTIONS ALLOWING 2 - 5 WORKING DAYS NOTICE AND PROVIDE SAFE ACCESS**

The personal information provided as part of this application is collected under the Safety Codes Act and the Municipal Government Act and in accordance with the Freedom of Information and Protection of Privacy Act. The information is required and will be used for issuing permits, safety codes compliance verification and monitoring, and property assessment purposes. The name of the permit holder and the nature of the permit is available to the public upon request. If you have any questions about the collection or use of the personal information provided, please contact the Municipality.

**SYSTEM DRAWING**

✓ Complete drawing of proposed system, layout of laterals, position and location of tank etc.




**Comments:**

---

---

---

---

---

---

---

---

---

---