

Osceola County Public Health

c/o Auditor's Office ~ 300 7th St. ~ Sibley, IA 51249 ~ Phone 712/754-2241

APPLICATION FOR A PERMIT TO CONSTRUCT, RECONSTRUCT OR ALTER A PRIVATE SEWAGE DISPOSAL SYSTEM

1. Permit Application Fee: \$150.00 Date: _____

2. Address of Installation: _____ Township: _____
_____ Section: _____

3. Owner: _____ Telephone: _____

Address: _____ City: _____ Zip: _____

Tenant: _____ Telephone: _____

Plumber/Contractor: _____ Telephone: _____

4. Building Type: _____ New _____ Existing

_____ Commercial _____ Type of business or building
_____ Single Family House _____ Number of Bedrooms
_____ Multi Family House _____ Number of Units _____ Number of Bedrooms/unit
_____ Basement fixtures (toilet, shower, or sink)

5. Water Contributing Devices: _____ Water softener _____ Garbage Disposal _____ Whirlpool bath

6. Lot Size: _____ x _____ or farmstead acres: _____

7. Water Supply: (check all that apply): _____ Public _____ Private Well
_____ Depth of well on property _____ Distance of Well to Septic System
_____ Distance of Well to Distribution Lines

Well must be located 50' from the septic tank and 100' from the lateral lines

8. Attach a diagram (drawn to scale) of the proposed septic system, identifying the following:
(a) Lot lines (b) building (c) septic tank (d) laterals (e) wells (f) driveways (g) lake, stream, pond,
drainage ditch (h) foundation drains/subsurface tiles (if known) (i) water lines under pressure

9. If you are replacing or repairing an existing system, would you like information about the Onsite
Wastewater Loan Program? _____ Yes _____ No **(If yes, please contact Osceola County Health Department)**

10. Certification

I certify that, to the best of my knowledge, the proceeding attached information is correct, that all proposed work will be completed in accordance with Chapter 69 of the Iowa Administrative Code (On-site wastewater treatment and disposal systems) before the system is placed in operation, and that adequate maintenance procedures will be followed during the life of the system.

No part of the proposed system shall drain into any ditch, body of water, stream, drainage tile or be exposed to open air.

The Osceola County Board of Health may require the property owner to connect to a public sewer system when one becomes reasonable accessible. The Osceola County Board of Health, by issuance of this permit and performance of related inspections, does not warrant the performance of this wastewater disposal system, nor that it be free from defects.

Signature of Applicant

Date of Application

Please complete and return to the above address along with the permit fee. Thank you.

