



Permit Application

Request started on: _____ Request Completed on: _____ Req. No

Entered by: _____

Permit Type: **Ground water catchment work**

Identification

Owner

Name: _____
Address: _____
City: _____
Postal Code: _____
Phone: _____

Applicant

Name: _____
Address: _____
City: _____
Postal Code: _____
Phone: _____

Location of the work

Address: _____
Lot number: _____
Zone(s): _____
Roll No.: _____
Service: _____

Work

Contractor

Name: _____
Address: _____
City: _____
Postal code: _____
Phone: _____
Fax: _____
RBQ No.: _____

Responsible Person

Name: _____
Phone: _____
Work starting date: _____
Work completion target date: _____
Completion date: _____
Work value: _____

Ground water catchment work

Ground water collecting

Estimated capacity: _____ m³/day

Intended for human consumption:

Flooded Zone

No zone: Recurrent Flooded Zone 0-20 years: Recurrent Flooded Zone 20-100 years

Location of the Water Collecting System

Distance from:

Watertight wastewater treatment system (septic tank): _____ m

Non-watertight wastewater treatment system (weeping field): _____ m

River (lake, river, pond, creek): _____ m

Cultivated land: _____ m

Projected Water Collecting Construction Specifications

Type of Work: _____

Tubing : _____

Inside Diameter: _____ cm Watertight and durable sealing (annulus):

Length: _____ m

Depth: _____ m

Height: _____ cm

Required documents	Receipt	Receipt date
Form dully filled in	<input type="checkbox"/>	
Plot plan	<input type="checkbox"/>	
Location of the septic systems	<input type="checkbox"/>	

Work description

Applicant's signature

Applicant's signature _____ Date: _____