



For REPAIR only

EHD ON #: _____

PERMIT TO CONSTRUCT AN ONSITE WASTEWATER TREATMENT SYSTEM (OWTS)

<p>INSTRUCTIONS:</p> <ol style="list-style-type: none"> Check one: This Permit to Construct is for (check one): NEW _____ REPAIR _____ ABANDONMENT _____ Check one: I am the Property Owner _____ Licensed Contractor _____ Property owner's authorized agent _____ If NEW, complete items 1 and 6 below. If REPAIR, complete items 1 and 6, plus, if applicable, items 2, 3, 4, and 5 below. If ABANDONMENT, complete items 1, 3, and 6 below. If you are the owner's authorized agent, be advised the following two forms MUST be completed and submitted with the application, or the application will NOT be accepted: a. Authorization of Agent b. Notice to Property Owner If you are the owner, complete this form: Notice to Property Owner For REPAIR or ABANDONMENT, provide a plot plan showing the system location. For NEW, REPAIR, or ABANDONMENT, provide a signed Certificate of Compliance with Construction Safety Requirements. Request for inspection must be made at least 24 hours in advance, excluding Saturdays, Sundays, and holidays. This Permit to Construct application expires in 180 days. 	<p style="text-align: center;">FOR OFFICE USE ONLY</p> <p>Recd By: _____ Date: _____</p> <p>Amount Received: _____ Check No.: _____</p> <p>Receipt No.: _____</p> <p>Design Reviewed By: _____ Date: _____</p> <p>Issued By: _____ Date: _____</p> <p>Construction Installation</p> <p>Approved By: _____ Date: _____</p> <p>Intended Use: _____</p> <p>3. BUILDING</p> <p>Type of Development: Residential: No. of Bedroom Equivalents _____ No. of Fixture Units _____</p> <p>Commercial: Number of Fixture Units _____ Maximum No. Employees/Visitors _____</p> <p>Water Supply: <input type="checkbox"/> Public: Name of Water Company _____ <input type="checkbox"/> Private _____</p> <p>Type of absorption system: <input type="checkbox"/> Leach Line <input type="checkbox"/> Seepage Pit <input type="checkbox"/> Mound System <input type="checkbox"/> Subsurface Filter: Length _____ x Width _____ = _____ Total Sq. Ft.</p> <p>4. SEPTIC TANK</p> <p>Number of Tanks _____ Capacity of Each Tank _____</p> <p>5. LEACH LINES</p> <p>Leach Line Installation</p> <p>Number of trenches _____ on _____ foot centers Length of each trench _____ feet Bottom width of trench _____ feet Earth cover over drainline _____ feet Rock under drain line _____ feet Total depth of each trench _____ feet Square feet/lineal feet of trench _____ Absorption area provided _____ sq. feet</p>														
<p>1. SITE INFORMATION</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Project Address _____</td> <td style="width: 50%;">Locality _____</td> </tr> <tr> <td>Owner's Name _____</td> <td>Nearest Cross Street _____</td> </tr> <tr> <td>Assessor Parcel Number _____</td> <td>Phone _____</td> </tr> <tr> <td>Mail Address _____</td> <td>City, State, Zip _____</td> </tr> <tr> <td colspan="2">E-mail Address _____</td> </tr> <tr> <td>Agent/Contractor _____</td> <td>Phone _____</td> </tr> <tr> <td>Agent/Contractor Address _____</td> <td>City, State, Zip _____</td> </tr> </table>	Project Address _____	Locality _____	Owner's Name _____	Nearest Cross Street _____	Assessor Parcel Number _____	Phone _____	Mail Address _____	City, State, Zip _____	E-mail Address _____		Agent/Contractor _____	Phone _____	Agent/Contractor Address _____	City, State, Zip _____	<p>2. SEEPAGE PITS</p> <p>Seepage Pit Installations</p> <p>Number of pits _____ Diameter of each pit _____ feet Earth cover over pits _____ feet Effective depth of each pit _____ feet Total depth of each pit _____ feet Absorption area provided _____ square feet</p> <div style="border: 1px solid black; padding: 5px;"> <p style="text-align: center;">CROSS SECTION OF A SEEPAGE PIT</p> <p>Labels: Earth Cover _____ feet, From septic tank, Asphalt treated building paper, Effective depth _____ feet, 4 in. perforated PVC or ABS pipe, Use clean rock 3/4 in. to 2 1/2 in., Diameter _____ feet, Total depth _____ feet</p> </div>
Project Address _____	Locality _____														
Owner's Name _____	Nearest Cross Street _____														
Assessor Parcel Number _____	Phone _____														
Mail Address _____	City, State, Zip _____														
E-mail Address _____															
Agent/Contractor _____	Phone _____														
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<p>6. DECLARATIONS</p> <p style="color: red;">Read and sign below; PLUS, complete a 2nd LEGAL DECLARATIONS form.</p> <p style="text-align: center;">GENERAL ACKNOWLEDGEMENT (FOR ALL APPLICANTS)</p> <p>I certify that I have read this application and state that the above information is correct. I agree to comply with all county ordinances and state laws relating to OWTS construction, and hereby authorize representatives of this city and county to enter upon the above mentioned property for inspection purposes. I further certify that no public sewer is available within 200 feet of the proposed OWTS or structure(s) served by the OWTS.</p> <p>Additionally, I understand that Section 105.5 of the Ventura County Building Code (VCBC) 2010 Edition states that: "Every permit issued by the Building Official under the provisions of this Code shall expire by limitation and become null and void, if the building or work authorized by such permit is not commenced within 180 days after the date of issuance of such permit or if the building or work authorized by such permit is suspended or abandoned at any time after the work is commenced for a period of 180 days, or if the work authorized by such permit does not receive final inspection approval within 3 years from the issuance date of the permit". For permit expiration purposes, "SUSPENDED OR ABANDONED" shall be measured as elapsed time between "APPROVED REQUIRED INSPECTIONS" as delineated in 2010 CBC Appendix Chapter 1, Sections 110.1 through 110.3.10. I further understand that I will not be notified by the County of Ventura prior to expiration of permit.</p>	<div style="border: 1px solid black; padding: 5px;"> <p style="text-align: center;">CROSS SECTION OF LEACH LINE</p> <p>Labels: Earth Cover _____ feet, Untreated building paper, Total trench depth _____ feet, 4 in. perforated PVC or ABS pipe, 2 in. Rock, Rock under pipe _____ feet, Use clean rock 3/4 in. to 2 1/2 in., Trench width _____ feet</p> </div>														

Print Name _____

Date _____

Signature of Property Owner, Owner's Authorized Agent, or Contractor _____

Please take a moment to provide feedback.
 An opinion form can be completed at
<http://www.vcrma.org/customer-service-evaluation-form-field-inspection>.
 You can also find it on our website under Services and Resources by scanning this QR code:

JA G:ADMIN/TECH SERVICES/Office Forms/Forms/P2C OWTS 4-18
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