2015 APPLICATION FOR PERMIT or EVALUATION NOT REFUNDABLE OR TRANSFERABLE - PAYABLE TO THE BAY COUNTY HEALTH DEPARTMENT Environmental Health Division, 1212 Washington Avenue, Bay City, MI 48708 - (989) 895-4006 No action can be taken until this APPLICATION is COMPLETED, both FRONT and BACK, and PROPER Fee is PAID.						
Office Use: Rec'd by: Date: Amt \$ O & M Report (Check if Required)         Receipt # Septic Permit # Well Permit # Tank Permit #         Date Flagged: NOTE:						
APPLICANT:		Ph	one #:			
MAILING ADDRESS:	nber St	reet/Road	/City	/ Zip		
PERMIT MAILED:Yes						
NEW SEWAGE <u>PER</u>	MIT (Evaluation re	equired for permit)		🗅	•	
REPLACEMENT SEV	NAGE <u>PERMIT</u> (E	Evaluation required f	or permit)	🗅	<u>\$286.00</u>	
LOAN EVALUATION	- SEPTIC OR WE	ELL		🗅	\$179.00	
	Residential Commercial	New New	Replacement Replacement		\$281.00 \$587.00	
Property Address/Road: Property Code Number: <b>09</b> - Township: Do you own the property? □		Section:	City: - Lot#:I	_ot Size:		
			□ NO □ YES, <u>you sho</u>		2,	
NEW/REPLACEMENT CONSTRUCTION	Show location	of property to the neare DRIVING DIREC	TIONS	<b>EVALUATION</b> Age of Sewage	System	
# of Employees <u>Residential</u> # of BedroomsWith Basement			N	REASON FOR EVA Replacing Adding a B	House edroom	
Mater Supply: Well Municipal				Prop Use Existin	g System	
Fuel Oil Heat?           Yes           No				Other		

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Must be completed for Loan Evaluations							
Applicant is required to arrange for a septage hauler to be present to pump septic tank at time of inspection. Applicant must call this department and septage hauler to set up a mutually agreeable day and time for this to take place.							
Age of House:years Number of Bedrooms: Is House Presently Occupied?							
WELL INFORMATION	SEPTIC SYSTEM INFORMATION						
Well Location:	Septic Tank Size:Gals.						
Well Depth: Casing Diameter: "	Disposal Area Size:Square Feet						
Well Drilled By:	Installed By:						
Date:	Approx. Date Installed:						
Note: Partial Chemical samples are forwarded to the MDEQ Lab in Lansing, Michigan. Results from MDEQ are available in 2-3 weeks.	Date of Last Pumping:						

Draw and show, if possible, the location of the following facilities for the property referenced on this application and adjacent lots where buildings are located within 150 feet of your property.

- You must include, to the best of your knowledge:
  - a) Property lines/dimension(s), sewage and well system location, driveway, pole barns(s), easements, drains, ditches and utilities.
  - b) Measurements in relation to lot lines.

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West	ast
	ISC
South ↓	

I hereby agree to comply with the Sanitary Code of Bay County, the well ordinance and any other code that applies to any permit issued to me or the permittee I represent. I give or have secured permission for the Bay County Health Department to enter the property referenced in this application for the purpose of making an onsite evaluation to determine the suitability of said parcel for construction of an onsite sewage disposal system and/or water supply, or to investigate health and/or environmental hazards and to issue public health orders to abate same. I also agree to comply with any design requirements or other requirements on the permit(s). Any Deviation from the specifications on the permit(s)must be approved in advance by the health Department. I also understand that the issuance of a permit does <u>not</u> constitute a guarantee of proper septic system functioning.

Appeals regarding any permit must be submitted to the Health Officer within ten (10) days of issuance of any permit.

Signature\_\_\_\_\_

Revised 1/1/2015