

TOWN OF DERUYTER
APPLICATION FOR A SEPTIC SYSTEM

CHECK ONE: Construction of New System
 Modification of Existing System

Date: _____

Applicant's Name: _____

Address: _____

Phone: (_____) _____

Property
Location: _____

Tax Map Number: _____

*Note: In order to conform to the standards set by the New York State Department of Health (NYSDH), Parts 1, 2 and 3 of this Application must be completed and this information submitted to the Codes Enforcement Officer prior to issuance of a permit allowing construction of a NEW on-site Residential Sewage Disposal System within the Town of DeRuyter.

The information necessary for a MODIFICATION of an existing system permit shall be as directed by the Sanitation Inspection Officer.

Application No. _____
Total Fee Paid: \$ _____
<input type="checkbox"/> Cash <input type="checkbox"/> Check No. _____
<input type="checkbox"/> Money Order

FEE MUST BE REMITTED AT TIME APPLICATION IS MADE.

**APPLICATION FOR ON-SITE
RESIDENTIAL SEWAGE DISPOSAL SYSTEM**

Part 1. Soil Investigation

At least two (2) test holes, widely spaced, shall be dug within the proposed leaching area to insure that uniform soil and site conditions prevail.

Each test hole shall be at least 5 feet deep and 2 feet square at the bottom.

Depth to bedrock, if any observed _____

Depth to seasonal high ground water _____

Date performed _____

Observed by _____

Soil Profile Observation Information should include depth, texture, structure, color and soil saturation for each test hole, presented in the following format:

Soil Pit No.: _____

Depth (feet)	Texture	Structure	Color	Soil Saturation
0	Silt Loam	Granular	Brown	None
2	Silt Clay Loam	Platy		
		Blocky		
4	Clay Loam	Platy		
	Sandy Loam			
6				

Note: The test holes are not to be used to perform percolation tests.

NAME & ADDRESS OF CONTRACTOR THAT DUG TEST HOLES:

Part 2. Soil Percolation Tests

Note: These tests shall be done in accordance with the procedures set forth in Appendix 75A Waste Treatment - Individual, page 9.

There shall be a minimum 12 hour pre-soak period.

DESCRIBE PRE-SOAK PROCESS:

Date and time of day of pre-soak: Start _____

Finish _____

Date and time of day of Perc Test: Start _____

Finish _____

Performed by: _____

Copies of percolation test data forms should be attached to this application.

It will be the applicant's responsibility to have two deep holes approximately 5 feet deep in the area of the leach field.

Also, two holes 24 to 30 inches deep that are pre-soaked by the applicant before the test is done.