## **Existing Sewage System - Application Review**

| Existing Sewage Syste                              | m - Applicatio                              | n Review     |                |         |                     |            |         |  |
|--|---|--------------|----------------|---------|---------------------|------------|---------|--|
| OWNER INFORMATION                                  |   |              |                |         |                     |            |         |  |
| Name:  | Phone #:                                    |              |                |         |                     |            |         |  |
| Mailing Address:                                   |   |              |                |         | Postal Code:        |            |         |  |
| Email:   |   |              |                |         | •                   |            |         |  |
| Name of Agent:                                     | Phone #:                                    |              |                |         |                     |            |         |  |
| PROPERTY DESCRIPTION                               |   |              |                |         |                     |            |         |  |
| Municipality:                                      | Township of Asphodel-Norwood                |              |                |         |                     |            |         |  |
| House #/Street/Road:                               |   | Lot: Conc:   |                |         |                     |            |         |  |
| Plan #:  | Sublot: Roll Number                         |              | Roll Number:   |         |                     |            |         |  |
| EXISTING SEWAGE SYSTEM                             | INFORMATION                                 |              |                |         |                     |            |         |  |
| Indicate Type: Septic Tan                          |   | Holding Tank |                | Other:  |                     |            |         |  |
| Do you posess records respecting your existing sew |   |              | spoal system?  | Yes 🔲 1 |                     |            | No      |  |
| → If yes, attach copies o                          | of the records or pr                        | ovide permi  | t #:           |         |                     |            |         |  |
| ➡ If known, state year th                          | 1. Sewage system installed:                 |              |                |         |                     |            |         |  |
|  |   | 2. Premises  | built:         |         |                     |            |         |  |
|  | 3. Owner of property when system installed: |              |                |         |                     |            |         |  |
| REASON FOR APPLICATION                             |   |              |                |         |                     |            |         |  |
| Addition Alte                                      | ration 🗌                                    | Change       | in Use         | Other _ | ]:                  |            |         |  |
| PROPOSAL   |   |              |                |         |                     |            |         |  |
| EXISTING   |   | PROPOSED     |                |         | TOTAL ON COMPLETION |            |         |  |
| Square Footage                                     | uare Footage                                |              | ootage         |         | Square Footage      |            |         |  |
| Bedrooms   |   | Bedroom      | S              |         | Bedro               | oms        |         |  |
| Toilets  |   | Toilets      |                |         | Toilets             |            |         |  |
| Bathtubs and/or Showers                            |   | Bathtubs     | and/or Showers |         | Bathtu              | bs and/or  | Showers |  |
| Kitchen Sink                                       |   | Kitchen S    | ink            |         | Kitche              | n Sink     |         |  |
| Washbasins   |   | Washbas      | ins            |         | Washb               | asins      |         |  |
| Dishwashers  |   | Dishwash     | ners           |         | Dishwa              | ashers     |         |  |
| Clothes Washers                                    |   | Clothes V    | Vashers        |         | Clothe              | s Washers  | i       |  |
| Laundry Tubs                                       |   | Laundry 1    | ubs            |         | Laundi              | y Tubs     |         |  |
| Garage/Outbuildings                                |   | Garage/C     | Outbuildings   |         | Garage              | e/Outbuild | ings    |  |
| Other:   |   | Other:       |                |         | Other:              |            |         |  |



Building Department 2357 County Road 45 Norwood ON, K0L 2V0 705-639-5343

## **Agent/Owner Authorization Form**

| A. Project Informat  | ion           |          |  |  |  |  |  |
|--|---------------|----------|--|--|--|--|--|
| Street Address:  |               |          |  |  |  |  |  |
| Proposed project:  |               |          |  |  |  |  |  |
|  |               |          |  |  |  |  |  |
| B. Party to be author  |               |          |  |  |  |  |  |
| •  |               |          |  |  |  |  |  |
| Name:  |               |          |  |  |  |  |  |
| Corporation or Partnership:  |               |          |  |  |  |  |  |
| Address:   |               | Lot/Con: |  |  |  |  |  |
| Phone #:   | Cell #:       | Email:   |  |  |  |  |  |
|  |               |          |  |  |  |  |  |
| C. Declaration of Ow   | /ner          |          |  |  |  |  |  |
| I,, being the Registered Owner of the above property hereby authorize the party stated in Section B of this form to make application for permit on my behalf to Building Department of the Township of Asphodel-Norwood in accordance with the applicable requirements of the Ontario Building Code for the purpose of the identified project. |               |          |  |  |  |  |  |
| Date:  | e: Signature: |          |  |  |  |  |  |

The Ontario Building Code states that "owner includes, in respect of the property on which the construction or demolition will take place, the registered owner, a lessee or mortgagee in possession".

**Note:** This form is valid only for one access to Building Permit record application. Subsequent applications by an authorized agent will require a new agent authorization form completed by the current property owner.