

PERMIT ~ NEW INSTALLATION / REPAIR PRIVATE SEWAGE DISPOSAL SYSTEM

(Soil Profile Test Required for all New& Replacement Installation Permits)

Site Address:			Zoning		
Site Plan (2 reqd.) Type of P.S.D. Syste	Attached: Yes No m Proposed:	Design (2 reqd.) A	attached: Yes	No	
operty Owner	Mailing Address	City/State/Zip	Phone		
ailding Contractor	Mailing Address	City/State/Zip	Phone	License #	
zstem Designer	Mailing Address	City/State/Zip	Phone	License #	
gineer	Mailing Address	City/State/Zip	Phone		
stem Installer	Mailing Address	City/State/Zip	Phone	License #	
LICE OF DIVIDING, CFD	Other (describe)	l	kurungan di Sanataura Canata di		
Inspection Department	tallations is permitted only upon f . 32905 W. 84 St., De Soto, KS 66 ermit & As-Built Drawings must b	6018 (913-583-1182 e130)	, ,	Building	
I affirm that the above st governing the construction	de Building Inspections "as built" attements are true and correct and I be not repair, alterations or use of the langer all required setbacks, easements, under the setbacks and the setbacks are required setbacks.	oind myself to comply with the Co	odes, Ordinances and Zonir installer/contractor, and no	of the city, is	
Signature of Installer	/ Contractor / Owner or Authori	zed Agent	Date		
Permit Fees: New System Install	_ • •		Re-Sale Inspection	\$100.00	
Total Due: \$		ion / Data	An Daville Dlama One Pil	/ Data	
Permit Approved By/I	Date Final Inspect	ion / Date	As Built Plans On-File	' Date	