



Farmington Valley Health District

95 River Road, Suite C ▪ Canton, CT 06019 ▪ Phone (860) 352-2333 ▪ Fax (860) 352-2542

Avon • Barkhamsted • Canton • Colebrook • East Granby • Farmington • Granby • Hartland • New Hartford • Simsbury

WATER TREATMENT WASTEWATER (WTW) APPLICATION AND PROPOSAL

\$50.00 - Evaluation without soil testing \$125.00 Evaluation with soil testing

Owner: _____

Property Address: _____

Phone Number: _____ Email address: _____

Contractor: _____ Phone number: _____

Is property served by a private well? Y / N If yes, does well casing extend above grade? Y / N

Type of water treatment, (e.g. softener/neutralizer): _____

Unit installation location (point of entry or point of use): _____

Provide a sketch showing the house, wells, property lines, road, driveway, watercourses, existing septic system and location of proposed new WTW.

Description of WTW _____ Volume cycle _____ Cycle frequency _____

Distance between WTW and: Well, _____ Septic System _____ Property Line _____ Watercourse _____

Variance needed? Y / N Storage volume _____

IT IS THE HOMEOWNER'S RESPONSIBILITY TO CONTACT THIS OFFICE FOR APPOINTMENTS.

- 1) I agree to hold the FVHD harmless for any site disturbance, damage or difficulties associated with this evaluation and subsequent work. 2) I acknowledge that I am responsible for securing any necessary permits required from other town agencies: (Building permit required). 3) As-built drawing required after installation.
- 4) 24 Hour notice is required if inspection is needed before installation.

Owner/Agent for Owner _____ Date: _____

For office use only –

Is soil test information available for this property? YES NO

If not, what is the basis for review? _____

Has a code complying area been determined for this property? YES NO

If a code complying area is not found, does the application meet the following conditions:

- 1. Accessory structure does not reduce the potential repair area. YES NO
- 2. The separation distances between the accessory structures shall comply with technical standard requirements. YES NO

Approved by (in accordance with PHC Section 19-13-B100a(e)): _____

Inspection required: Yes No