

**PRIVATE ON-SITE WASTE SYSTEM PERMIT APPLICATION  
MARSHALL WASHINGTON CLAY CLOUD (CIRCLE COUNTY)**

FEE: NEW STRUCTURE CONSTRUCTION=\$250.00 OR REPLACEMENT SYSTEM FOR EXISTING STRUCTURE=\$125.00

NAME OF OWNER OF PROPERTY:
CURRENT MAILING ADDRESS:
ADDRESS WHERE SYSTEM WILL BE INSTALLED:
OWNERS TELEPHONE:
NUMBER OF ACRES:
SYSTEM INSTALLER AND CONTACT NUMBER:
NUMBER OF SERVICE CONNECTIONS: ( # OF STRUCTURES ATTACHED)
LEGAL DESCRIPTION: (S-T-R)
AVERAGE NUMBER OF PEOPLE SERVED:
NUMBER OF BEDROOMS:
TYPE OF WATER SUPPLY (CIRCLE ONE): NEW WELL EXISTING WELL RURAL WATER CITY WATER OTHER
<b>NUMBER OF THE FOLLOWING:</b>
TOILETS
SINKS
SHOWER/BATHTUBS
DISHWASHER
WASHING MACHINE
FOUNDATION DRAIN*
ROOF DRAIN*
FLOOR DRAINS/SUMP PUMPS*
WATER SOFTENER

\*NO PERSON SHALL DEVELOP, SELL, USE, LEASE, MODIFY, OR NEWLY CONSTRUCT ON-SITE WASTEWATER SYSTEM UNTIL A PERMIT HAS BEEN OBTAINED.

\*NO PERMIT SHALL BE APPROVED UNTIL PLANS HAVE BEEN REVIEWED AND APPROVED BY SANITARIAN

\*ALL SYSTEMS MUST MEET THE REQUIREMENTS AND SEPERATION DISTANCES OUTLINED IN THE COUNTY SANITARY CODE AND KDHE 4-2

AUTHORITY: I CERTIFY THE INFORMATION ON THIS APPLICATION TO BE TRUE TO THE BEST OF MY KNOWLEDGE:

APPLICANT'S SIGNATURE:

DATE:

CHECK TO: **COUNTY CLERK**

MAIL TO: NCK ENVIRONMENTAL LEPP, 214 C STREET, WASHINGTON, KS 66968      PHONE 785-770-2057