

# Septic

## Information Guide

2024



# Information Package for a Sewage System Application

On-site sewage systems are regulated by the Ontario Building Code, O. Reg. 332/12 made under the Ontario Building Code Act, S.O. 1992, c. 23 provided that:

- The total daily design sanitary sewage flow does not exceed 10,000 litres per day; and
- The on-site sewage system and all building(s) the sewage system services are located on the same parcel of land.

This information package is meant to be used for guidance only when completing the application for a sewage system permit. Be advised that the Building Code Act and the Ontario Building Code supersede any discrepancies with this document.

**NO PERSON SHALL CONSTRUCT REPAIR, ALTER, INSTALL OR PERFORM ANY WORK ON A SEWAGE SYSTEM UNLESS A BUILDING PERMIT HAS BEEN ISSUED**

## CLASSES OF SEWAGE SYSTEMS

- CLASS 1** A sewage system that is used for the disposal of **human body waste (no added water)**. A permit is not required for the construction of a Class 1 sewage system. Examples include: earth pit privy (outhouse), composting toilet (no overflow), and privy vault. Building Code and zoning provisions do apply to Class 1 systems, even though a permit is not required.
- CLASS 2** A sewage system that is used for the disposal of **greywater** from a sink, tub, shower, or laundry units. Also commonly known as a leaching pit. A permit is required for the construction of a Class 2 sewage system.
- CLASS 3** A sewage system that is used for the disposal of human body wastes from another type of sewage system, such as overflow waste from a composting toilet. Also commonly known as a **cesspool**. A permit is required for the construction of a Class 3 sewage system.
- CLASS 4** A sewage system that is used for the disposal of **domestic sewage**. The system includes a treatment unit and leaching bed (e.g. septic tank and filter bed). A permit is required for the construction of a Class 4 sewage system.
- CLASS 5** A sewage system that is used for the disposal of domestic sewage. The system includes a **holding tank** for the retention of sewage and must be emptied by a licensed sewage hauler. A permit is required for the construction of a Class 5 sewage system.

## Documents to be submitted with application

- Application- completed in its entirety
- Floor plans for all levels of the home including the basement identifying all rooms, washrooms and number of fixtures
- Rooms labeled Offices and Dens, shall be counted as a bedroom (as per definition found in the Development Charges By-law)
- Site plan
- Schedules 1 through 7

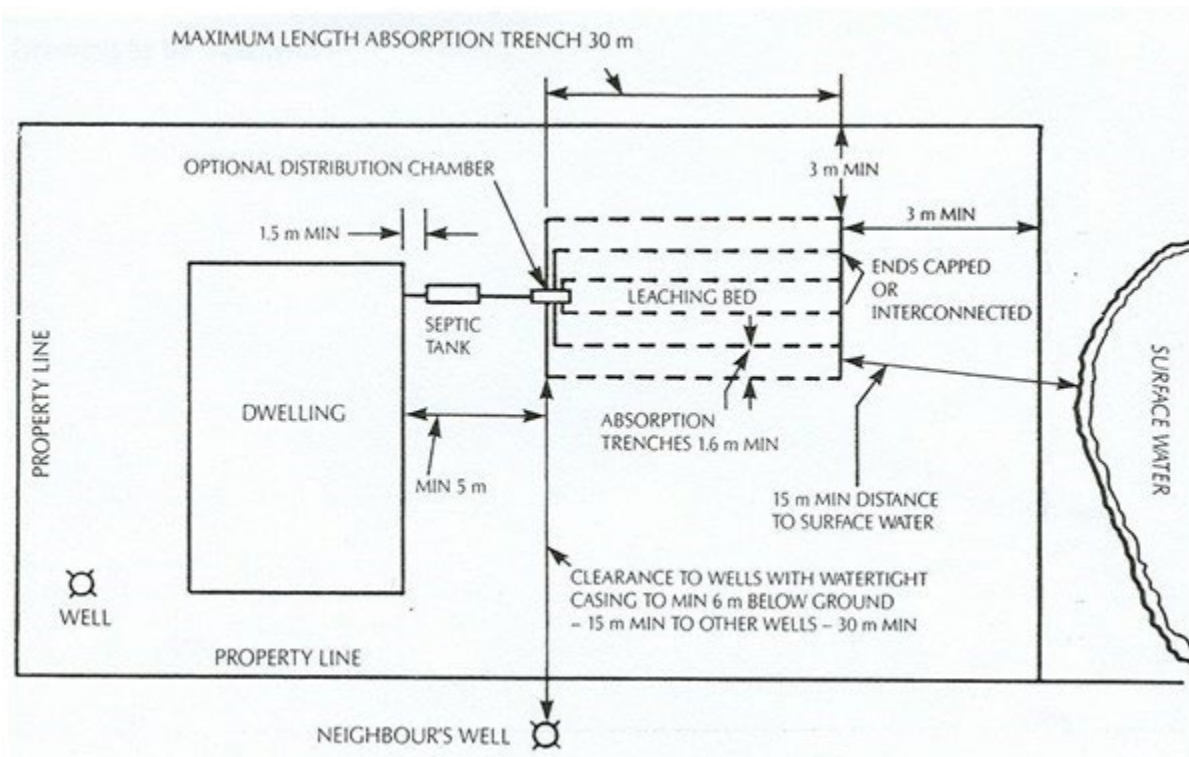
## Sewage System Site plan requirements

The proposed site layout is an important document. If the site plan does not reflect all applicable items below, or if it doesn't match the site upon inspection, there will be delays in the issuance of the permit. This may be drawn in the space provided or attached with the application separately.

A site plan neatly and legibly drawn to scale must be provided with the sewage application including the following:

- Lot size with dimensions
- Location of proposed and/or existing buildings and use of buildings noted
- Location of all decks (attached and detached) and accessory buildings
- Setbacks to the proposed buildings including decks
- Setbacks to the proposed septic tank and bed
- Location of all waterbodies and the name and setbacks to waterbodies
- Location of mantle and direction of flow (if applicable)
- Loading Area
- Driveway location
- Overhead Hydro lines - Setbacks from overhead hydro lines (min 4.8m) to the sewage system
- Type and location of wells, including on neighbouring properties.
- Location of sewage systems if known on adjacent properties
- Road name
- If more than one sewage system is located on the property, all systems to be shown including tank and bed locations
- Foundation drainage outlet locations
- Eavestrough down spout discharge locations

## Typical Arrangement of a Septic Tank System:



### Notes:

1. The 3m minimum from the property line is also as required by the Zoning By-law - General Zoning or site specific.
2. Location of any proposed drywell pits and trenches from the dwelling
3. Type of well (for property of applicant and neighbour's)
4. Location of tank and leaching bed to be on lower ground than adjacent wells or springs, if possible.
5. Internal plumbing and main drainage outlet should be designed with a view to connecting to possible future sanitary sewers.
6. Roof water, surface water, discharge from footing drains, etc., must be excluded from entry to septic tank.
7. Leaching beds NOT to be located in swampy ground or in ground prone to flooding.
8. See the Regulation regarding details for the siting of the septic tank and tile bed.

Sewage system components must meet the minimum horizontal clearance distances as outlined in the tables below.

<p><b>Table 8.2.1.6.A. (O. Reg. 332/12)</b>  <b>Forming part of Sentence 8.2.1.6.(1)</b></p> <p><b><u>Minimum Clearances for Treatment Units:</u></b></p> <table> <tr><td>Structure</td><td>1.5m</td></tr> <tr><td>Well</td><td>15 m</td></tr> <tr><td>Lake</td><td>15 m</td></tr> <tr><td>Pond</td><td>15 m</td></tr> <tr><td>Reservoir</td><td>15 m</td></tr> <tr><td>River</td><td>15 m</td></tr> <tr><td>Spring water</td><td>15 m</td></tr> <tr><td>Stream</td><td>15 m</td></tr> <tr><td>Property Line</td><td>3.0 m</td></tr> </table>	Structure	1.5m	Well	15 m	Lake	15 m	Pond	15 m	Reservoir	15 m	River	15 m	Spring water	15 m	Stream	15 m	Property Line	3.0 m	<p><b>Table 8.2.1.6.B. (O. Reg. 332/12)</b>  <b>Forming part of Sentence 8.2.1.6.(2)</b></p> <p><b><u>Minimum Clearances for Distribution Piping:</u></b></p> <table> <tr><td>Structure</td><td>5 m</td></tr> <tr><td>Well with a watertight casing to a depth of 6m:</td><td>15 m</td></tr> <tr><td>Any other Well</td><td>30 m</td></tr> <tr><td>Lake</td><td>15 m</td></tr> <tr><td>Pond</td><td>15 m</td></tr> <tr><td>Reservoir</td><td>15 m</td></tr> <tr><td>River</td><td>15 m</td></tr> <tr><td>A spring not used as a source of potable water:</td><td>15 m</td></tr> <tr><td>Stream</td><td>15 m</td></tr> <tr><td>Property Line</td><td>3 m</td></tr> </table>	Structure	5 m	Well with a watertight casing to a depth of 6m:	15 m	Any other Well	30 m	Lake	15 m	Pond	15 m	Reservoir	15 m	River	15 m	A spring not used as a source of potable water:	15 m	Stream	15 m	Property Line	3 m
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**TABLE 8.2.1.5.**  
**Forming Part of Sentence 8.2.1.5.(1)**

**Clearance Distances for Class 1, 2, and 3 Sewage Systems:**

	Minimum horizontal distance in metres from a well with watertight casing to a depth of at least 6m.	Minimum horizontal distance in metres from a spring used as a source of potable water or well other than well with a watertight casing of at least 6m.	Minimum horizontal distance in metres from a lake, river, pond, stream, reservoir, or a spring not used as a source of potable water.	Minimum horizontal distance in metres from a Property Line.
Earth Pit Privy	15	30	15	3
Privy Vault Pail Privy	10	15	10	3
Grey water System	10	15	15	3
Cesspool	30	60	15	3

## Site Expectations

The following is meant to make known the expectations of the Building Department before site visits take place. This is hoped to avoid on site confusion by making known upfront what will be expected by staff to ensure a smooth inspection and assist to keep the installation moving forward.

### First Visit/Test Holes

- Two (2) test holes shall be dug to at least 1.5 m deep
- Test holes to be placed a minimum of 5 m apart and within proposed leaching bed location
- Test holes to be provided with dug steps in the event the test pit is required to be entered
- Area of septic bed to be identified on site with one of the following methods:
  - Spray paint on the corners of the bed;
  - Marking of proposed well location if known
- Open holes to be covered with protection to prevent rainwater from entering
- Test hole locations clearly marked and protected to prevent persons from falling in

### Field Inspection of Sewage System Prior to Backfill

An “As Built System” layout must be sent prior to the site inspection or be provided to the inspector on site at the time of inspection. This is meant to ensure that the final inspection before backfilling will go as smoothly as possible, and any changes made during construction are already documented before inspection. This document will become part of the final approval documentation as the system layout that is paired to the use permit once the system is approved.

This document requirement is meant to expedite the inspection process and keep the business of installers and the building department moving forward. We understand the sooner we can inspect and approve the installation; the sooner equipment can move off site and to the next project; having said that, we do request 48 hours notice of the required inspection.

The following is expected for the final inspection before backfilling the system:

- As built system layout provided on site or sent to building department prior to final inspection. Layout to note all setbacks for confirmation on site by inspector
- Make and model of pumps (if used) to be noted on as built design.
- The volume of tank and markers clearly visible on septic or holding tank, top of tank not to be backfilled for inspection

- Lids of tank accessible – any special tools or bits needed to remove tank lids provided or left for inspector on site
- All distribution and header piping clearly visible and not backfilled
- All header piping is located on compacted base
- Distribution boxes (if used) not backfilled and located on compacted base
- Corners of bed and each run of distribution piping are required to be pinned with metal stakes to allow for future detection, or all distribution pipes lined with Tracer wire
- All buried piping or forcemains not within the leaching bed area to be lined with tracer wire as per Ontario Building Code
- Any changes in design or system component locations provided to and approved by the Building Department prior to final inspection

# How to complete an Application

ALL SECTIONS OF APPLICATION MUST BE FILLED OUT IN FULL

## Project Information

This section must be completed in its entirety. An agent authorized by the owner to act on their behalf must attach a written letter of authorization to the application form or the owner must sign the last page of the application form. Property descriptions may be located on transfer deeds, surveys or tax bills. A copy of either the transfer deed or tax bill must accompany the application in order to confirm the property description and provide proof of ownership.

### A. Purpose of Application

For a sewage system, the purpose will typically be either new construction or an alteration/repair. Select the appropriate box, describe the proposed and current uses of buildings and describe the nature of the work in the box provided.

For example:

- check new construction for the installation of a new sewage system
- proposed use of building – residential
- current use of building – vacant lot
- description of proposed work – install new sewage system to service a proposed dwelling

### C. Applicant

The applicant is the individual making application for the sewage system permit. This individual could be the property owner, builder, relative, installer, etc. If the applicant is not the property owner, a letter of authorization must accompany the application or the property owner must sign the last page of the application.

### D. Owner

This section must list the owner's information. The address listed here must be the mailing address NOT the property address; in some cases, it may be the same.



## **E. Builder**

If the builder is known, provide their information here. If this information is not provided, the builder will not be able to access the sewage system permit information.

## **F. Tarion Warranty Corporation**

Generally not required for on-site sewage install unless the Builder is also the sewage installer, then this section must be must be completed in its entirety.

## **G. Required Schedules**

Schedules are already attached and will be completed later in the application.

## **H. Completeness and compliance with applicable law**

This section must be completed in its entirety.

### Applicable Law:

Before a permit for a sewage system will be issued, applicable law (Act, Regulation, or By-law) must be complied with.

Examples include:

- Municipal Zoning By-law
- Conservation Authority
- Planning Act
- Any other applicable law (i.e. Kawartha Regional Conservation Authority, Trent-Severan Waterway, Ministry of Northern Development, Mines, Natural Resources and Forestry)

## **I. Declaration of Applicant**

This section must be completed in its entirety, signed and dated by the Applicant.

## Schedule 1: Designer Information

The Schedule 1 must be completed in its entirety. This section refers to the designer of the sewage system, not the building. If a property owner is submitting their own design, the design work is exempt from registration and qualification on the basis that a property owner is entitled to design their own sewage system, under O. Reg. 332/12, Div. C, Part 3. If the installer of the sewage system is providing the design for their own installation, the installer would be listed as an “other designer”.

## Schedule 2: Sewage System Installer Information

The Schedule 2 must be completed in its entirety and should be completed by a Qualified Sewage System Installer. The signature of the property owner or agent is required in order to authorize the work. BCIN (Building Code Identification Numbers) must be provided.

If the property owner is installing their own sewage system, then only sections A, B, and E need to be completed. Under section B, the middle box (“no”) is selected because the property owner is not engaged in the business of constructing sewage systems.

## Directions to the Property

This section must be complete for every application. Provide detailed directions to the property.

## Site and Design Information

Schedules 3, 4, 5, 6 and 7 must be completed in their entirety.

- Proposed septic bed location to be identified on the ground through stakes, paint, or by other means at the corners of the proposed septic bed location.
- Water Supply – complete details
- State number of Fixture Units – complete details and calculations as appropriate  
(see chart below)
- All fixtures must be accounted for, including rough-ins.

Fixture Unit Type	Fixture Unit Volume
Water Closets (Toilets)	X4
Kitchen Sink (A double sink to one trap is counted as 1 sink)	X1.5
Wash Basin (e.g. bathroom sink)	X1.5
Bathtub and/or Shower	X1.5
Dishwasher – separately plumbed	X1.0
Dishwasher – plumbed through kitchen sink	X 0
Clothes Washing Machine	X1.5
Single or Double Laundry Tub	X1.5
Floor Drains – 2” trap	X2.0
Floor Drains – 3” trap	X3.0

**Total Number of bedrooms:** All bedrooms on the property including the dwelling unit (main floor, upper stories, and basement) sleeping cabins/lofts, dens, office, playrooms, and other unidentified rooms that appear could be used as a bedroom will be required to be counted as bedrooms for purposes of the septic design.

**Finished Area:** The total amount of finished area on the property, including the primary dwelling and all outbuildings including sleeping cabin(s), garage loft, sunroom, etc.

Note: the area of the finished basement is excluded (basement below grade).

**Total Fixture Units:** The number calculated above.

**Total Design Sanitary Sewage Flow:** The total design sanitary sewage flow is referred to as “Q” in the formulas used below.

Table 8.2.1.3.A. Residential Occupancy	Volume (Litres)
Boarding houses a: Per person, i) with meals and laundry facilities, or ii) without meal or laundry facilities, and b: Per non-resident staff per 8 hour shift	200 150 40
Boarding School - per person	300

Dwellings	a) 1 bedroom dwelling	750
	b) 2 bedroom dwelling	1100
	c) 3 bedroom dwelling	1600
	d) 4 bedroom dwelling	2000
	e) 5 bedroom dwelling	2500
	f) Additional flow for (2)	
	i) each bedroom over 5	500
	ii) (A) each 10 m <sup>2</sup> (or part of it) over 200 m <sup>2</sup> up to 400m <sup>2</sup>	100
	(B) each 10 m <sup>2</sup> (or part of it) over 400 m <sup>2</sup> up to 600 m <sup>2</sup> , and	75
	(C) each 10 m <sup>2</sup> (or part of it) over 600 m <sup>2</sup> , or	50
	iii) each fixture unit over 20 fixture units	50
Hotels and Motels (excluding bars and restaurants)		
	a) Regular, per room	250
	b) Resort hotel, cottage, per person	500
	c) Self service laundry, add per machine	2500
Work Camp/Construction Camp, semi-permanent per worker		250
	Column 1	2

**Notes for Table 8.2.1.3.A:**

1. The occupant load shall be calculated using Subsection 3.1.17.
2. Where multiple calculations of sewage volume is permitted the calculation resulting the highest flow shall be used in determining the design daily sanitary sewage flow.
3. Total finished area, excluding the area of the finished basement.

For all other occupancies, the total daily design flow rate shall be at least the value as stated in Column 2 from Table 8.2.1.3.B of the Ontario Building Code.

## Soils

This section must be completed in its entirety.

Two test holes, 1.5 metres deep and 5 metres between test holes, provides the method by which you can observe the subsoil profile and ground water conditions in the proposed location of the leaching bed. The test holes must be open and available for inspection purposes. Ensure the test holes are protected for safety reasons. Test holes are to be covered between excavation and inspection to mitigate infiltration of rain.

**Depth to Bedrock:** Distance from original grade to bedrock (if encountered).

**Depth to high ground water table:** Distance from original grade to high water table (if encountered).

**Percolation Rate:** The percolation rate (“T”) means the average time in minutes that is required for water to drop one centimetre during a percolation test onsite or as determined by soils analysis.

<b>Approximate Relationship to Soil Types To Permeability and Percolation Time</b>			
Soil Type	Coefficient of Permeability K- cm/sec.	Percolation Time T- mins/cm.	Comment
G.W. - Well graded gravels, gravel-sand mixtures, little or fines.	$10^4$	< 1	very permeable unacceptable
G.P. - Poorly graded gravels, gravel-sand mixtures, little or no fines.	$10^4$	< 1	very permeable unacceptable
G.M. - Silty gravels, gravel sand silt mixtures.	$10^2 - 10^4$	4 - 12	Permeable to medium permeable depending on amount of silt.
G.C. - Clayey gravels, gravel-sand-clay mixtures.	$10^4 - 10^4$	12 - 50	Important to estimate amount of silt and clay
S.W. - Well graded sands, gravelly sands little or no fines.	$10^4 - 10^4$	2 - 12	medium permeability
S.P. - Poorly graded sands gravelly sand, little or no fines.	$10^4 - 10^3$	2 - 8	medium permeability
S.M. - Silty sands, sand, sand-silt mixtures.	$10^3 - 10^5$	8 - 20 permeability	medium to low permeability
S.C. - Clayey sands, sand-clay mixtures.	$10^4 - 10^6$	12 - 50	medium to low permeability (depends on amount of clay)
M.L. - Inorganic silts and very fine sands, rock flour, silty or clayey fine sands, clayey silts with slight plasticity	$10^5 - 10^6$	20 - 50	medium to low permeability
C.L. - Inorganic clays of low to medium plasticity, gravelly clays, sandy clay, lean clays	$10^5$ and less	over 50	unacceptable
O.L. - Organic silts, organic silty clays of low plasticity; liquid limit less than 50	$10^5$ and less	20 - over 50	acceptable depends on clay content.

# Proposed Sewage System Design

Schedule 4 must be completed in its entirety.

There are two critical pieces of information that must be known in order to design a sewage system.

- The daily design sanitary sewage flow, “Q” as calculated above, and
- the percolation rate, “T”

For more information regarding sewage system design refer to the Municipality of Trent Lakes’s guidance document for the appropriate Class of sewage system to be installed.

**Note: The inspector will not design a sewage system. The owner, agent, installer, design consultant or engineer must propose the design.**

## Declaration Page

The property owner and/or agent must sign the final page of the application. If only the applicant’s signature appears, a letter of authorization must be attached to the application, as previously mentioned.

## Other Notes

Incomplete applications will be returned to the applicant.

Payment **MUST** be made at time of application.



## **Application for a Permit to Construct a Sewage System**

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**The following information is required to complete the application for a permit to construct a sewage system.**

- A copy of the tax bill or land transfer deed.
- Completed application signed by owner or by authorized agent. (Written authorization must be provided.)
- Permit fee.
- Completed lot diagram.
- Completed design of sewage system.
- At least 2 test holes 1.5 metres in depth. Test holes are to be dug in the area proposed for the sewage system.
- Documents establishing compliance with applicable law.

**Please note that incomplete applications will be returned to the applicant.**

**Once the completed application has been reviewed, an Inspector will visit the property to inspect the test holes and site.**

**If you have any questions regarding this application, please contact the Inspector at the Municipality of Trent Lakes (705-738-3800 or 1-800-374-4009) weekdays.**



# Fees for Service Related to Sewage Systems

## Effective April 1, 2024

<u>SERVICE</u>	<u>TYPE</u>	<u>PROPOSED FEE</u>
<b>Sewage System Building Permits</b>	Permit for Class 4 Sewage System, design capacity less than or equal to 4500 litres per day	\$1000
	Permit for a Class 4 Sewage System, design capacity greater than 4500 litres per day and less than or equal to 10,000 litres per day	\$1450
	Permit for Class 4 Sewage System Tank Replacement only	\$500
	Permit for Class 5 Sewage System (Holding tank)	\$1000
	Permit for Class 3 Sewage system (Cesspool)	\$500
	Permit for Class 2 Sewage System (Greywater System)	\$500
	Sewage System Permit for Trench Bed repair or extension of 16 m or less	\$500
	Sewage System Permit for Filter Bed repair, replacement or extension of 6 m or less	\$500
	Transfer of permit to new owner	\$375
	Existing System Inspection	\$500
<b>Addition, renovations or Inground / Above ground swimming pool installations (review of existing septic system)</b>	Existing System Inspection	\$500
<b>Rezoning, Minor Variance, and site -specific Official Plan Amendments</b>	Rezoning or minor variance comments	\$200
<b>Severance or subdivision comments</b>	First Lot	\$300
	Each Additional lot	\$150



<b>Severance or subdivision Re-Inspection</b>	First Lot Each Additional Lot	\$300 \$150
<b>Permit Review Administrative Fee (formally a renewal fee)</b>	Administrative fee for permit to be reinstated if system is not completed within the 2-year life of the permit upon expiration date.	\$300
<b>Amendment to septic permit</b>	Permit required to be amended after permit has been issued.	\$250
<b>Field Consultation Fee</b>	Site inspection to meet contractor or homeowner to discuss a future project in connection to a required septic system.  If a permit is issued within the same calendar year, this fee will be applied against the normal septic permit fee.	\$350
<b>Copies</b>	Copies of archived permits	\$35.00
<b>File Search</b>	File search (e.g. Lawyer, real estate, owner) copies and letter	\$125.00

**Note:** All fees will be subject to a percentage increase each year based on the consumer indexing rate, on January 1<sup>st</sup> of each year.

Permit #
Receipt #
Date Rec'd



# APPLICATION FORM & PROPOSAL FOR ON-SITE SEWAGE SYSTEM BUILDING PERMIT

**NOTE:** The property owner, applicant, designer and installer of the sewage system retain full responsibility for knowing the requirements of the Building Code Act & Ontario Building Code and ensuring that the sewage system is designed in accordance with the regulatory requirements and installed in accordance with the approved plans. By submitting this document you agree that the information provided can be shared with your local municipality and/or designer/installer and/or other persons as deemed necessary or involved in the project on the property in question.

If the listed applicant is not the property owner, please provide a **Letter of Authorization** from the registered property owner.

A guide to this application form is available from the Trent Lakes Municipal office or available online at [www.trentlakes.ca](http://www.trentlakes.ca) under our Build Menu - Septic Systems.

**All submissions can be made through [ca.cloudpermit.com](http://ca.cloudpermit.com)**

**Owner communication method:**  Mail  E-mail  Fax  Pick Up  
**Installer communication method:**  Mail  E-mail  Fax  Pick Up

1. Name of property owner _____ Phone no. (_____) _____ Email _____	2. Name of installer <input type="checkbox"/> Licensed <input type="checkbox"/> Unknown <input type="checkbox"/> Owner Install _____ Phone no. (_____) _____ Email _____
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PROPERTY INFORMATION				
Property Address				
Municipality				
Lot	Con.	Sub-lot	Plan	Parcel
Assessment roll no.				

Directions to lot: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

The proposed system will be (check appropriate box):

**CLASS 2: GREYWATER PIT**

**CLASS 3: CESSPOOL**

**CLASS 4: LEACHING BED/TANK**  Tank & bed  Tank only  Bed only  Treatment unit

**CLASS 5: HOLDING TANK**

# Application for a Permit to Construct or Demolish

This form is authorized under subsection 8(1.1) of the *Building Code Act, 1992*

<b>For use by Principal Authority</b>				
Application number:		Permit number (if different):		
Date received:		Roll number:		
Application submitted to: _____ (Name of municipality, upper-tier municipality, board of health or conservation authority)				
<b>A. Project information</b>				
Building number, street name			Unit number	Lot/con.
Municipality	Postal code	Plan number/other description		
Project value est. \$		Area of work (m <sup>2</sup> )		
<b>B. Purpose of application</b>				
New construction	Addition to an existing building	Alteration/repair	Demolition	Conditional Permit
Proposed use of building		Current use of building		
Description of proposed work				
<b>C. Applicant</b>				
		Applicant is:	Owner or	Authorized agent of owner
Last name	First name	Corporation or partnership		
Street address			Unit number	Lot/con.
Municipality	Postal code	Province	E-mail	
Telephone number	Fax		Cell number	
<b>D. Owner (if different from applicant)</b>				
Last name	First name	Corporation or partnership		
Street address			Unit number	Lot/con.
Municipality	Postal code	Province	E-mail	
Telephone number	Fax		Cell number	

<b>E. Builder (optional)</b>				
Last name		First name	Corporation or partnership (if applicable)	
Street address			Unit number	Lot/con.
Municipality		Postal code	Province	E-mail
Telephone number		Fax		Cell number
<b>F. Tarion Warranty Corporation (Ontario New Home Warranty Program)</b>				
i. Is proposed construction for a new home as defined in the <i>Ontario New Home Warranties Plan Act</i> ? If no, go to section G.			Yes	No
ii. Is registration required under the <i>Ontario New Home Warranties Plan Act</i> ?			Yes	No
iii. If yes to (ii) provide registration number(s): _____				
<b>G. Required Schedules</b>				
i) Attach Schedule 1 for each individual who reviews and takes responsibility for design activities.				
ii) Attach Schedule 2 where application is to construct on-site, install or repair a sewage system.				
<b>H. Completeness and compliance with applicable law</b>				
i) This application meets all the requirements of clauses 1.3.1.3 (5) (a) to (d) of Division C of the Building Code (the application is made in the correct form and by the owner or authorized agent, all applicable fields have been completed on the application and required schedules, and all required schedules are submitted). Payment has been made of all fees that are required, under the applicable by-law, resolution or regulation made under clause 7(1)(c) of the <i>Building Code Act, 1992</i> , to be paid when the application is made.			Yes	No
ii) This application is accompanied by the plans and specifications prescribed by the applicable by-law, resolution or regulation made under clause 7(1)(b) of the <i>Building Code Act, 1992</i> .			Yes	No
iii) This application is accompanied by the information and documents prescribed by the applicable by-law, resolution or regulation made under clause 7(1)(b) of the <i>Building Code Act, 1992</i> which enable the chief building official to determine whether the proposed building, construction or demolition will contravene any applicable law.			Yes	No
iv) The proposed building, construction or demolition will not contravene any applicable law.			Yes	No
<b>I. Declaration of applicant</b>				
I _____ declare that: (print name)				
1. The information contained in this application, attached schedules, attached plans and specifications, and other attached documentation is true to the best of my knowledge.				
2. If the owner is a corporation or partnership, I have the authority to bind the corporation or partnership.				
_____		_____		
Date		Signature of applicant		

Personal information contained in this form and schedules is collected under the authority of subsection 8(1.1) of the *Building Code Act, 1992*, and will be used in the administration and enforcement of the *Building Code Act, 1992*. Questions about the collection of personal information may be addressed to: a) the Chief Building Official of the municipality or upper-tier municipality to which this application is being made, or, b) the inspector having the powers and duties of a chief building official in relation to sewage systems or plumbing for an upper-tier municipality, board of health or conservation authority to whom this application is made, or, c) Director, Building and Development Branch, Ministry of Municipal Affairs and Housing 777 Bay St., 2nd Floor. Toronto, M5G 2E5 (416) 585-6666.

## Schedule 1: Designer Information

Use one form for each individual who reviews and takes responsibility for design activities with respect to the project.

<b>A. Project Information</b>			
Building number, street name	Unit no.	Lot/con.	
Municipality	Postal code	Plan number/ other description	
<b>B. Individual who reviews and takes responsibility for design activities</b>			
Name	Firm		
Street address	Unit no.	Lot/con.	
Municipality	Postal code	Province	E-mail
Telephone number	Fax number		Cell number
<b>C. Design activities undertaken by individual identified in Section B. [Building Code Table 3.5.2.1. of Division C]</b>			
House	HVAC – House	Building Structural	
Small Buildings	Building Services	Plumbing – House	
Large Buildings	Detection, Lighting and Power	Plumbing – All Buildings	
Complex Buildings	Fire Protection	On-site Sewage Systems	
Description of designer's work			
<b>D. Declaration of Designer</b>			
<p>I _____ declare that (choose one as appropriate):</p> <p style="text-align: center;">(print name)</p> <p>I review and take responsibility for the design work on behalf of a firm registered under subsection 3.2.4. of Division C, of the Building Code. I am qualified, and the firm is registered, in the appropriate classes/categories.</p> <p>Individual BCIN: _____</p> <p>Firm BCIN: _____</p> <p>I review and take responsibility for the design and am qualified in the appropriate category as an "other designer" under subsection 3.2.5. of Division C, of the Building Code.</p> <p>Individual BCIN: _____</p> <p>Basis for exemption from registration: _____</p> <p>The design work is exempt from the registration and qualification requirements of the Building Code.</p> <p>Basis for exemption from registration and qualification: _____</p> <p>I certify that:</p> <ol style="list-style-type: none"> <li>1. The information contained in this schedule is true to the best of my knowledge.</li> <li>2. I have submitted this application with the knowledge and consent of the firm.</li> </ol> <p style="text-align: center;">             _____              Date <span style="margin-left: 200px;">Signature of Designer</span> </p>			

**NOTE:**

1. For the purposes of this form, "individual" means the "person" referred to in Clause 3.2.4.7(1) (c) of Division C, Article 3.2.5.1. of Division C, and all other persons who are exempt from qualification under Subsections 3.2.4. and 3.2.5. of Division C.
2. Schedule 1 is not required to be completed by a holder of a license, temporary license, or a certificate of practice, issued by the Ontario Association of Architects. Schedule 1 is also not required to be completed by a holder of a license to practice, a limited license to practice, or a certificate of authorization, issued by the Association of Professional Engineers of Ontario.

## Schedule 2: Sewage System Installer Information

<b>A. Project Information</b>			
Building number, street name		Unit number	Lot/con.
Municipality	Postal code	Plan number/ other description	
<b>B. Sewage system installer</b>			
Is the installer of the sewage system engaged in the business of constructing on-site, installing, repairing, servicing, cleaning or emptying sewage systems, in accordance with Building Code Article 3.3.1.1, Division C?			
Yes (Continue to Section C)		No (Continue to Section E)	
		Installer unknown at time of application (Continue to Section E)	
<b>C. Registered installer information (where answer to B is "Yes")</b>			
Name		BCIN	
Street address		Unit number	Lot/con.
Municipality	Postal code	Province	E-mail
Telephone number	Fax	Cell number	
<b>D. Qualified supervisor information (where answer to section B is "Yes")</b>			
Name of qualified supervisor(s)		Building Code Identification Number (BCIN)	
<b>E. Declaration of Applicant:</b>			
<p>I _____ declare that:</p> <p style="text-align: center;">(print name)</p> <p>I am the applicant for the permit to construct the sewage system. If the installer is unknown at time of application, I shall submit a new Schedule 2 prior to construction when the installer is known;</p> <p><u>OR</u></p> <p>I am the holder of the permit to construct the sewage system, and am submitting a new Schedule 2, now that the installer is known.</p> <p>I certify that:</p> <ol style="list-style-type: none"> <li>1. The information contained in this schedule is true to the best of my knowledge.</li> <li>2. If the owner is a corporation or partnership, I have the authority to bind the corporation or partnership.</li> </ol> <p>_____</p> <p style="display: flex; justify-content: space-between;"> <span>Date</span> <span>Signature of applicant</span> </p>			

## Schedule 3: Site Evaluation Form

### TEST PIT

Sub-surface conditions encountered:

		Applicant's Use		Inspector's Use	
Indicate <u>depth</u> to bedrock, T>50, &/or ground water table (where present):	Depth (m)	Soil type	T-time	Soil type	T-time
Test hole(s) available for inspection: YES      NO					

**Water Supply:**       Proposed       Existing

Lake     
  Drilled well     
  Dug well     
  Other (specify): \_\_\_\_\_

Shore road allowance owned:    N/A    YES    NO    Municipal zoning \_\_\_\_\_

Has the lot been previously severed?    YES    NO    Zoning approval(s) attached?    YES    NO

Lot dimensions:    Frontage (m) \_\_\_\_\_    Depth (m) \_\_\_\_\_    Area (m<sup>2</sup>) \_\_\_\_\_

### Inspector's Report:

Date: _____ Time: _____ Weather: _____	Suitable for in-ground installation:    YES    NO    PARTIAL Proposed height of raised bed (m): _____ Increased setbacks required?            YES            NO Setback distances adhered to:            YES            NO
Person(s) in attendance	MLA existing:            YES            NO            PARTIAL
Watercourses on lot:    YES    NO    Name: _____ SRA owned:    N/A    YES    NO	Proposal acceptable & meets OBC requirements? YES    NO            Acceptable with changes _____ _____ _____
Applicable Law:            N/A MTO    HYDRO    EP    OTHER: _____ Increased municipal setbacks required:    YES    NO O.Reg. 177/06 (North Bay office only):    YES    NO	Inspector's signature: _____ Date: _____
Slope _____ Vegetation _____	

**Comments/concerns/additional information required:**

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Property address \_\_\_\_\_

Schedule 4: Design Criteria

DESCRIPTION	DWELLING #1		BOATHOUSE		SLEEPING CABIN		Other: _____		# UNITS PER FIXTURE	FIXTURE UNITS
	Existing	Proposed	Existing	Proposed	Existing	Proposed	Existing	Proposed		
Bathroom group (toilet, sink, tub/shower)									x 6 =	
Additional toilet									x 4 =	
Bathtub or shower(*)									x 1.5 =	
Additional sinks(**)									x 1.5 =	
Kitchen sink(**)									x 1.5 =	
Dishwasher									x 1 =	
Washing machine									x 1.5 =	
Laundry tub									x 1.5 =	
Other: _____										
<b>FIXTURE UNITS</b>									Total:	
<b>FINISHED FLOOR AREA</b>		m <sup>2</sup>		m <sup>2</sup>		m <sup>2</sup>		m <sup>2</sup>	Total:	m <sup>2</sup>
<b># OF BEDROOMS</b>									Total:	

\* Tub/shower combos count as 1.5 units

\*\* Sinks whether double or single count as 1.5 units

DESIGN FLOW CALCULATION TABLE				
Residential Occupancy			Volume (L)	Flows
Bedroom flow (A)	1 bedroom dwelling		750	
	2 bedroom dwelling		1100	
	3 bedroom dwelling		1600	
	4 bedroom dwelling		2000	
	5 bedroom dwelling		2500	
Extra bedroom flow (B)	Each bedroom over 5,		500	
Living area flow (C)	Each 10 m <sup>2</sup> (or part thereof) over 200 m <sup>2</sup> up to 400 m <sup>2</sup> ,		100	
	Each 10 m <sup>2</sup> (or part thereof) over 400 m <sup>2</sup> up to 600 m <sup>2</sup> , and		75	
	Each 10 m <sup>2</sup> (or part thereof) over 600 m <sup>2</sup> , or		50	
Fixture count flow (D)	Each fixture unit over 20 fixture units		50	

**Daily Design Sewage Flow, Q = \_\_\_\_\_ liters/day A + (B or C or D)**

OFFICE USE ONLY

\_\_\_\_\_ APPROVED \_\_\_\_\_ NOT APPROVED

DATE: \_\_\_\_\_



Property address \_\_\_\_\_

## Schedule 5: Proposal to Construct

Propose to \_\_\_\_\_ a Class \_\_\_\_\_ sewage system to serve \_\_\_\_\_  
(construct, install, alter, extend, enlarge, replace, etc.) (facility: e.g. single family dwelling, motel, etc.)

Is the land currently vacant? YES NO Additions / renovations proposed? YES NO

If replacing, is there a permit for the system on the property? YES NO Permit # \_\_\_\_\_

Is the existing system failing? YES NO Explain: \_\_\_\_\_

Is there more than one system on the property? YES NO Permit # \_\_\_\_\_

Will the proposed system service more than one building? YES NO List: \_\_\_\_\_

Provide **proposed** information rather than minimum requirements:

Class 2 Greywater Pit     Class 3 Cesspool    (For flow calculations see OBC Part 8, 8.4.1.2(2): Q cannot exceed 1000 L/D)

Type of Class 1 on site:     Privy     Composting     Chemical     Other: \_\_\_\_\_

Wall structure:     Cement block     Rock     Wood     Other: \_\_\_\_\_

Sidewall area:    m<sup>2</sup>    Length:    m    Width:    m    Depth:    m    Type of cover: \_\_\_\_\_

Septic Tank     Class 5 Holding Tank     Treatment Unit     Digester Tank

New     Use existing    Size \_\_\_\_\_    Permit # \_\_\_\_\_     Level II     Level III     Level IV

Proposed working capacity: \_\_\_\_\_ Liters    Make / Model of treatment unit: \_\_\_\_\_

T-time (min/cm): \_\_\_\_\_ Method of subsurface detection: \_\_\_\_\_ Pump required?  No     Effluent     Raw     TBD

Class 4F Filter Bed    Number of beds: \_\_\_\_\_    Bed area: \_\_\_\_\_ m<sup>2</sup>  
 Raised height (above grade): \_\_\_\_\_ m    Contact Area: \_\_\_\_\_ m<sup>2</sup>

Mantle loading area: \_\_\_\_\_ m<sup>2</sup>     Native     Imported    Length \_\_\_\_\_ m x Width \_\_\_\_\_ m

Class 4 Trench Bed    Total length: \_\_\_\_\_ m    Raised height (above grade): \_\_\_\_\_ m

Mantle loading area: \_\_\_\_\_ m<sup>2</sup>     Native     Imported    Length \_\_\_\_\_ m x Width \_\_\_\_\_ m

Type A / B    Stone area: \_\_\_\_\_ m<sup>2</sup>    Sand area:  Native (supply sieve analysis)     Imported  
 Sand area: \_\_\_\_\_ m<sup>2</sup>    Raised height (above grade): \_\_\_\_\_ m

SBT / BNQ / BMEC /  
Other (Fill accordingly)

**OFFICE USE ONLY**

\_\_\_\_\_ APPROVED    \_\_\_\_\_ NOT APPROVED

DATE: \_\_\_\_\_

Property address \_\_\_\_\_

## Schedule 6: Site Plan Diagram

Designer on file:	Installer on file:
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PROPOSAL

**DRAWING REQUIREMENTS: PLEASE CHECK (IF ATTACHING A SEPARATE DIAGRAM PLEASE ENSURE THESE ARE INDICATED)**

<p><input type="checkbox"/> <b>1 Copy of site plan submitted</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Property owners name and property address (civic);</li> <li><input type="checkbox"/> Lot size, property dimensions, roads, existing rights-of-way, easements, or municipal/utility corridors;</li> <li><input type="checkbox"/> Show and identify neighboring properties, including wells (indicate if none);</li> <li><input type="checkbox"/> Show location and size of all proposed and existing sewage system components (tanks, pump chambers, alarms, distribution bed) and the test pits;</li> <li><input type="checkbox"/> Show the direction of surface water flow, as well as any surface water (i.e. creek, pond, lake) on or adjacent to the property and provide the common name;</li> <li><input type="checkbox"/> Indicate directions of North on the site plan;</li> <li><input type="checkbox"/> Indicate distances to all utilities (i.e. telephone, HYDRO lines above and below ground); and</li> <li><input type="checkbox"/> <b>Show the distances from pipes in bed and tank to ALL buildings, structures, property lines, surface water, easements, rights-of-way, driveways and wells (including neighboring wells)</b></li> </ul>	<p><b>PROPOSED DISTANCES (Actual, <u>not</u> minimum)</b></p> <p><b>Distribution pipe (or stone area) distances:</b></p> <p>to closest structure: _____ m</p> <p>to closest lot line: _____ m</p> <p>to well on lot: _____ m</p> <p>to neighboring wells: _____ m / _____ m</p> <p>to surface water: _____ m</p> <p><b>Septic tank/Treatment unit distances:</b></p> <p>to closest structure: _____ m</p> <p>to closest lot line: _____ m</p> <p>to well on lot: _____ m</p> <p>to neighboring wells: _____ m / _____ m</p> <p>to surface water: _____ m</p>
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<b>OFFICE USE ONLY</b>	
_____ APPROVED    _____ NOT APPROVED	DATE: _____

Property address \_\_\_\_\_

## Schedule 7: Cross Sectional Diagram

Designer on file:

Installer on file:

PROPOSAL

**DRAWING REQUIREMENTS: PLEASE CHECK (IF ATTACHING A SEPARATE CROSS SECTION PLEASE ENSURE THESE ARE INDICATED)**

**1 Copy of Cross-Sectional Diagram Submitted**

- Property owners name and property address (civic);
- Depth of topsoil;
- Depth of crushed stone;
- Depth of filter medium used;
- Depth and dimensions of contact area required;
- Depth to bedrock/groundwater table;
- Depth to hardpan/soils T-time >15min/cm;
- Height above/below existing grade of ground surface;
- Show side slopes of bed/mantle;
- Existing grade/finished grade; and
- Distance between pipes.

Depth to bedrock/GWT/  
hardpan/soils T-time >50: \_\_\_\_\_m

Check appropriate:    Dug In    Raised    3 sides open

Proposed raised height above existing grade : \_\_\_\_\_m

Existing grade: \_\_\_\_\_

Finished side slope ratio: \_\_\_\_\_

**OFFICE USE ONLY**

\_\_\_\_\_ APPROVED    \_\_\_\_\_ NOT APPROVED

DATE: \_\_\_\_\_

# Attention Applicant or Agent

- I agree to comply with the provisions of the Ontario Building Code, as amended. I further agree that neither the granting of a permit, nor the approval of plans, nor inspections made by the Inspector shall in any way relieve me from my responsibility for carrying out the work in accordance with the legislation mentioned above. I also understand that it is my responsibility to arrange for the necessary inspections as specified in writing by the Inspector at the time of permit issuance.
- Applicants are responsible for ensuring that the information provided is true and accurate. I also understand that, once a Permit has been issued, there shall be no change in the plans, specifications, documents or other information on which the Permit was issued unless, written authorization is first received from the Building Inspector. Trent Lakes will not be held responsible for incorrect information provided herein by the applicant.

\_\_\_\_\_  
Owner's Signature

\_\_\_\_\_  
Agent's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

- The Inspector will return all applications, which are incomplete or unsigned. This application does not constitute a permit.
- **No work shall commence until a permit has been issued.**



[trentlakes.ca](http://trentlakes.ca)

760 Peterborough County Rd 36

Trent Lakes, ON K0M 1A0

**Phone:** 705-730-3800 or **Toll Free:**

1-800-7374-4009 **Fax:** 705-738-3801

**Email:** [development@trentlakes.ca](mailto:development@trentlakes.ca)



*Municipality of*  
**Trent Lakes**

