



Information Request

Please Note: All information must be completed on this application form. Incomplete information may cause delays or an inaccurate response. Payment must also accompany this form.

Applicant Name:

Tel: Fax: Email:

Mailing Address:

Property Owner (if different than above):

Subject Property Location

Civic Address: Town:

Nearest Intersection:

Lot: Conc.: Reg. Plan: Sub Lot:

Municipality: Former Municipality:

Current use: Proposed use:

Please Check the applicable box(es):

- | | |
|--|----------|
| <input type="checkbox"/> Septic System Record Search - Image (see box A) | \$ 70 |
| <input type="checkbox"/> Septic System Record Search - Image and Letter (see box A) | \$ 90 |
| <input type="checkbox"/> Screening Fee; Cursory Review and Written Response (see box B) | \$ 115 |
| <input type="checkbox"/> Property Inquiry (10 business days, see box B) | \$ 265 |
| <input type="checkbox"/> Property Inquiry - Expedited review (5 business days, see box B) | \$ 515 |
| <input type="checkbox"/> Property Inquiry with Site Inspection (10 business days, see box B) | \$ 465 |
| <input type="checkbox"/> Data request (see box B) | Variable |

Total applicable fee:

(A) Septic Permit Record Information (if applicable)

- Approximate date of sewage system installation: _____
- Owner at the time of installation or a list of previous owners _____

(B) Planning Property Review Documents/Information (if applicable)

- Cover letter with specific information requested/reason for review
- Site map and site plan showing distance from buildings, roads, watercourses, top of slope

Signature

Date

SUBMISSION INSTRUCTIONS:

Please send completed forms to septic@nation.on.ca or return to SNC Office.