



Park Enterprises Ltd.  
 #10, 491 W.T. Hill Blvd,  
 Lethbridge, AB T1J 1Y6  
 Phone: 1(800) 621-5440  
 Fax: 1(866) 406-8484  
 Email: [contact@parkenterprises.ca](mailto:contact@parkenterprises.ca)

## Private Sewage System Permit Application

**Permit Applicant:** ☐ Owner ☐ Contractor

**Application Date** (mm/dd/yyyy): \_\_\_\_\_

**Estimated Start Date** (mm/dd/yyyy): \_\_\_\_\_

**Development Permit No.** (if applicable): \_\_\_\_\_

**Estimated Completion Date** (mm/dd/yyyy): \_\_\_\_\_

**Building Permit No.** (if applicable): \_\_\_\_\_

**Value of Work** (labour & materials): \_\_\_\_\_

**Owner Name** (printed): \_\_\_\_\_  
**Mailing Address:** \_\_\_\_\_ **City/Town/Village:** \_\_\_\_\_ **Province:** \_\_\_\_\_ **Postal Code:** \_\_\_\_\_  
**\*Email:** \_\_\_\_\_ **Owners Phone #:** \_\_\_\_\_ **Fax #:** \_\_\_\_\_

**Contracting Company Name** (printed): \_\_\_\_\_ **Contact Name** (printed): \_\_\_\_\_  
**Mailing Address:** \_\_\_\_\_ **City/Town/Village:** \_\_\_\_\_ **Province:** \_\_\_\_\_ **Postal Code:** \_\_\_\_\_  
**\*Email:** \_\_\_\_\_ **Owners Phone #:** \_\_\_\_\_ **Fax #:** \_\_\_\_\_

**Project Location**  
**Municipality:** \_\_\_\_\_ **Subdivision/ Hamlet Name:** \_\_\_\_\_ **Tax Roll No.:** \_\_\_\_\_  
**Street/ Rural Address:** \_\_\_\_\_ **Unit:** \_\_\_\_\_  
**\* Legal land description is required**  
**Lot:** \_\_\_\_\_ **Block:** \_\_\_\_\_ **Plan:** \_\_\_\_\_ **LSD:** \_\_\_\_\_ **Quarter:** \_\_\_\_\_ **Section:** \_\_\_\_\_ **Township:** \_\_\_\_\_ **Range:** \_\_\_\_\_ **West of:** \_\_\_\_\_  
**Directions:** \_\_\_\_\_

**Description of Work** (please provide a **complete** and **detailed** description of the work to be completed including all applicable drawings/ documents):

☐ Work has not started ☐ Work is in progress ☐ Work is complete

### WORK SHOULD NOT COMMENCE BEFORE PERMIT IS ISSUED / WORK MUST BE INSPECTED BEFORE COVERING

**Submit with application:** ☐ Completed Site Evaluation and System Design Report as per the current Alberta Private Sewage Systems Standard of Practice

TYPE OF WORK	INITIAL COMPONENT	SOIL BASED TREATMENT SUMMARY
Please only select applicable item(s)	Please only select applicable item(s)	Please only select applicable item(s)
<input type="checkbox"/> <b>New Installation</b> <input type="checkbox"/> <b>Alteration of Existing System</b> <input type="checkbox"/> Residential # of bedrooms: _____ <input type="checkbox"/> Commercial # of seats (employees): _____ <input type="checkbox"/> Industrial <input type="checkbox"/> Institutional <input type="checkbox"/> Farm Building <input type="checkbox"/> Work Camp # of beds: _____ Variance No.: _____ Variance Exp. Date: _____ Expected Peak Volume: _____ <input type="checkbox"/> L/day <input type="checkbox"/> Imp. Gal/day <input type="checkbox"/> Meters <sup>3</sup> /day (not to exceed 25 m <sup>3</sup> /day)	<input type="checkbox"/> Holding Tank Model No.: _____ Capacity: _____ CSA Cert No.: _____ <input type="checkbox"/> Septic Tank Model No.: _____ Capacity: _____ CSA Cert No.: _____ <input type="checkbox"/> Packaged Sewer Treatment Plant <input type="checkbox"/> Sand Filter <input type="checkbox"/> Effluent Tank <input type="checkbox"/> Settling Tank <input type="checkbox"/> Lift Station	<input type="checkbox"/> Treatment Field <input type="checkbox"/> LFH At-Grade <input type="checkbox"/> Chamber System Treatment Field <input type="checkbox"/> Open Discharge <input type="checkbox"/> Treatment Mound <input type="checkbox"/> Lagoon <input type="checkbox"/> Sub-surface Drip Dispersal <input type="checkbox"/> Privy (with holding tank) <input type="checkbox"/> Enhanced Surface Discharge Depth to Restrictive Layer: _____ <input type="checkbox"/> Meters <input type="checkbox"/> Feet <input type="checkbox"/> Inches Depth to Limiting Layer: _____ <input type="checkbox"/> Meters <input type="checkbox"/> Feet <input type="checkbox"/> Inches Limiting Soil Characteristics: Texture: _____ Structure: _____ Grade: _____ Soil Infiltration Area Required: _____ <input type="checkbox"/> Meters <sup>2</sup> <input type="checkbox"/> Feet <sup>2</sup> Soil Effluent Loading Rate: _____ <input type="checkbox"/> L/day <input type="checkbox"/> Imp. Gal/day Linear Loading Rate: _____ <input type="checkbox"/> L/day <input type="checkbox"/> Imp. Gal/day

**FOIP Notification:** The personal information required by the Town of Diamond Valley application forms is collected under the authority of section 33(c) of the Alberta Freedom of Information and Protection of Privacy Act and will be protected under Part 2 of that Act and section 63 of the Safety Codes Act. It will be used for processing permit applications, issuing permits, safety codes compliance monitoring and verification. The name of the permit holder and nature of the permit may be included on reports provided to the municipality or made available to the public as required or allowed by legislation. Please direct any questions about this collection to the Town of Diamond Valley at 403-933-4348 or 301 Centre Avenue West, Diamond Valley TOL 0H0.

**Certified Installer's Name** (please print) \_\_\_\_\_ **Certification No.** \_\_\_\_\_ **Certified Installer's Signature** \_\_\_\_\_

**Homeowner's Signature** (homeowner permit only) **Homeowner Declaration:** I hereby declare I am the owner of the premises in which the work will be conducted and reside or will reside on the property. I am doing the work myself, and assume responsibility for compliance with the applicable Act and Regulations.

### OFFICE USE ONLY

**Other Permits Required** ☐ Building ☐ Electrical ☐ Gas ☐ Plumbing ☐ Not Applicable

**Permit Fee:** \$ \_\_\_\_\_

**SCC Levy:** \$ \_\_\_\_\_

(\$4.50 or 4% of the permit fee maximum \$560.00)

**Travel Fee:** \$ \_\_\_\_\_

**Total Cost:** \$ \_\_\_\_\_

**Receipt #:** \_\_\_\_\_

☐ Invoiced ☐ Cash ☐ Cheque ☐ Debit

☐ Credit Card ☐ Visa ☐ MC (attach signed credit card authorization form)

[Received Date Stamp]

eSITE Permit No.: \_\_\_\_\_

Agency File No.: \_\_\_\_\_

\*Email address fields and legal land description are required to be completed. Please go to [parkenterprises.ca](http://parkenterprises.ca) for FAQs and application checklists.