



Private Sewage Disposal Permit Application

9921-100 Street, Box 420, Sexsmith, AB T0H 3C0  
Phone: 780.568-0215 Fax: 780.568-2200  
www.sexsmith.ca/assistcao@sexsmith.ca

Permit Number: PRPSW

Roll Number:

Application Date: Development Permit Number:  
Permit Type: ☐ Owner ☐ Contractor Building Permit No.:  
Other Permits/Applications Required: ☐ Development ☐ Building ☐ Electrical ☐ Plumbing ☐ Gas

Landowner:  
Mailing Address:  
City: Province:  
Postal Code: Phone:  
Fax: E-mail:

Applicant:  
Mailing Address:  
City: Province:  
Postal Code: Phone:  
Fax: E-mail:

Contractor Name:  
Mailing Address:  
City: Province:  
Postal Code: Phone:  
Fax: E-mail:  
Certified Installer/Journeyman's Name:  
Certified Installer/Journeyman Number:

Legal: Lot: Block: Plan:  
Part of: 1/4 Sec: Twp: Rng: W6M  
Civic/Rural Address:  
Subdivision Name:

Estimated Start Date: Estimated Completion Date:

Type of Work: ☐ New Work ☐ Renovation ☐ Connection ☐ Temporary  
☐ Camp ☐ Other

\*Please check all that apply

Intended Use: ☐ Agricultural ☐ Residential ☐ Commercial ☐ Industrial  
☐ Institutional ☐ Other



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Permit Number: PRPSW Roll Number:

System Design Criteria (please complete all applicable items):

☐ New Installation
☐ Alteration
Volume of Effluent:
☐ m³/day
☐ gallons/day
☐ litres/day

- Components Used:
- ☐ Packaged Sewage Treatment Plant
☐ Open (Surface) Discharge
☐ Sewage Lagoon
☐ Sand Filter
☐ At Grade (Variance Required)
☐ Septic Tank
☐ Holding Tank
☐ Disposal Field
☐ Treatment Mound
☐ Other Initial Treatment
☐ Other Final Disposal Method
- Size:

Size:

Size:

Size:

Size:

Size:

\*Please check all that apply

Description of Work:

Permit Applicant Declaration: The permit applicant hereby certifies that this installation will be completed in accordance with the Alberta Safety Codes Act and Regulations, all applicable Codes, and Municipal Bylaws. Work shall commence within 90 days from the date of the issuance of the permit and expires in accordance with the Town of Sexsmith's Uniform Quality Management Plan (QMP) without extension request. If the work authorized by the permit is suspended or abandoned for a period of 120 days at any time after the work has commenced, the permit will expire.

The personal information on this form is collected under the authority of Section 33(c) of the Freedom of Information and Protection of Privacy Act, Section 642 of the Municipal Government Act and /or the Safety Codes Act. The information will be used to process the application(s) and the names &/or address of where the development /use is being proposed may be made available to the public upon request or at a Public Council Meeting. If you have any questions on the collection and use of the information; please contact the FOIP Representative at 780-532-9722.

I hereby certify that I am the owner or owner's agent of the property for this application. I have read and understood the statements printed on this form. I agree to all applicable laws in this jurisdiction.

Applicant Name (Please Print) Applicant Signature

Application Fee:

SEXSMITH Portion of Permit Fee:

COUNTY Portion of Permit Fee:

Penalty:

Permit Fee Subtotal:

Safety Codes Council Levy:

Other Fee:

Total Fee:

SSRV

CR95

Payment Method:

☐ Cash
☐ Debit
☐ Cheque
☐ Money Order
☐ Invoice