

KINGSTON, FRONTENAC AND LENNOX AND ADDINGTON HEALTH UNIT

221 PORTSMOUTH AVENUE, KINGSTON, ONTARIO • CLOYNE, ONTARIO
 MEMORIAL BUILDING, DUNDAS ST. W., NAPANEE, ONTARIO • SHARBOT LAKE, ONTARIO

USE PERMIT FOR CLASS 4, 5, 6 SEWAGE SYSTEMS

APPLICATION NO.

08-1390 **LO-82-90**

INSPECTION DETAILS	TIME 11:30AM	DATE AUG. 9 / 90	WEATHER SUNNY
REPRESENTING:	THE OWNER RICHARD LEES	THE INSTALLER D. RIDOLE	

1. Work authorized by the Certificate of Approval has been satisfactorily completed and includes:
- a) Septic tank/holding tank of working capacity of 4500 Litres constructed of steel concrete fibreglass on site or prefabricated to serve 3 (no. of bedrooms or units).

MAKE AND MODEL, IF PREFABRICATED TANK **PCL**

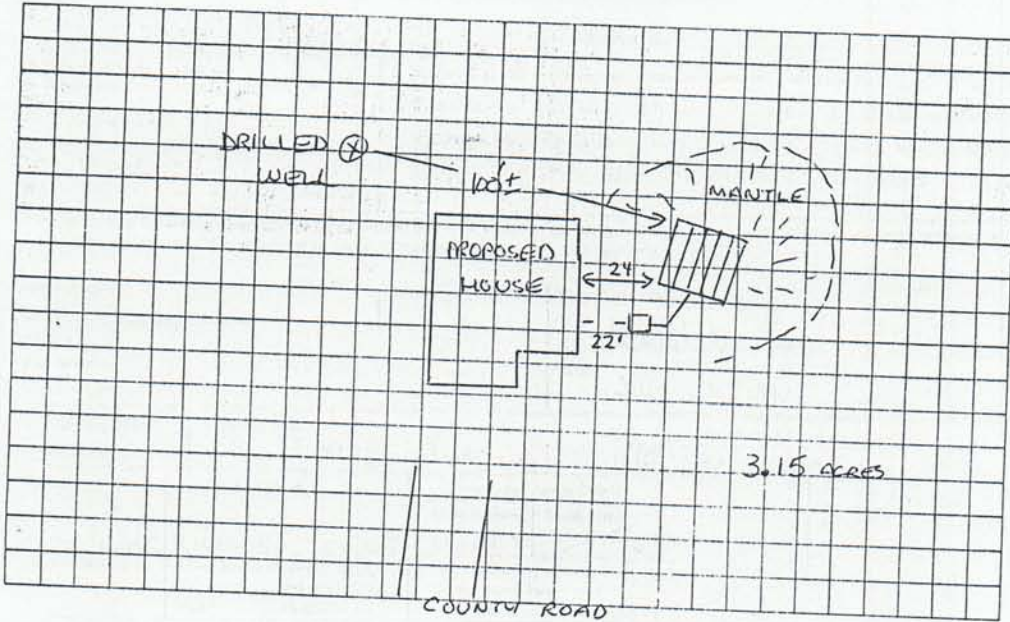
b) Leaching bed of total 3 metres of 3 inch diameter distribution pipe of **PVC** (type and product description) laid in 6 runs and fed by **GRAVITY** (gravity, siphon, pump).

c) Proprietary Aerobic System: (Manufacturer) _____ (Model) _____

d) Other details **FILTER MEDIUM BED** 18 FT X 23 FT = 414 sq feet

2. Location

- a) System components installed as shown on application supporting Certificate of Approval
- b) If located other than in (a) use space below for sketch and dimensions from permanent points of reference sufficient to facilitate future location of tank and leaching bed including orientation of pipe runs.



3. The following work remains to be completed:-

- Backfill System and Complete Finish Grading to Shed Run-off and Divert Water Around Leaching Bed
- Stabilize All Sloped Surfaces Other seed or sod leaching bed area

Any Use Permit issued hereunder may be revoked if this work is not completed promptly to Provincial standards.

USE PERMIT

Under Section 67(1) of The Environmental Protection Act, and subject to the provisions of The Act and Regulations a Permit is hereby issued to (Owner) **RICHARD + MARSHA LEES** for the use and operation of the Class 4 sewage system constructed/installed/enlarged/extended/alterd pursuant to the Certificate of Approval issued under the above application number in accordance with the application and Certificate of Approval with any changes indicated above and located on Lot 17 Concession 6 Ward/Township/Municipality **LOUGH**, Region/District/County **FRONTENAC** Plan No. **13R-9514** Sub-Lot No. _____

INSPECTED AND RECOMMENDED BY <i>[Signature]</i>	PERMIT ISSUED BY D. Coe DIRECTOR	DATE ISSUED Aug 9/90
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APPLICATION FORM AND CERTIFICATE OF APPROVAL FOR A CLASS 2-6 SEWAGE SYSTEM

Application No. LO-82-90
 Fee Receipt No. K-325-90 #80
 Date Received July 24/90

(Please Print Clearly)

1. Name of Owner MARSHA - WORK Tel. No. 546-1137
RICHARD & MARSHA LEES 376-3170

2. Installer's Name UNKNOWN Tel. No. _____

Address RR #2 PERTH ROAD Address _____
 (No., Street) (No., Street)
 City, Town, etc.) ONTARIO K0H-2L0 City, Town, etc.) _____

3. Propose to INSTALL a Class 4 sewage system to serve SINGLE FAMILY DWELLING
 (Construct/Install/Alter/Extend/Enlarge) (Facility: e.g. Single Family Dwelling, Motel, Cottage, etc.)

4. Location - Region, County, District
FRONTENAC LOUGHBOROUGH Lot No. 17 Conc. No. 6 Sub-Lot No. 13R-9514 Plan No. 13R-9514 Area of Lot (sq. m.) 3.15 ACRES

5.	Bedrooms or Motel Units	People	Flush Toilets	Urinals	Washbasins (sinks)	Showers & Bathtubs	6. Water Supply
State No. of	<u>3</u>	<u>4</u>	<u>3</u>	<u>0</u>	<u>4</u>	<u>2</u>	Proposed <input checked="" type="checkbox"/> or Existing <input checked="" type="checkbox"/> Dug or Bored Well <input type="checkbox"/> Drilled Well <input checked="" type="checkbox"/> Municipal <input type="checkbox"/> <u>EXISTING</u> Casing Depth <u>DRILLED WELL</u> Other <u>22 FT CASING</u>

7. Attach completed sketch on Page 2 - List other attachments:

Deed No. _____ Instrument No. _____

8. Relationship to Severance if applicable
 Lot Approval Pending
 Lot Approved
 Under Severance Application
 No. _____

9. Directions to Lot:— Highway No., Secondary Roads, Signs to Follow, etc.
FRONTENAC COUNTY RO #10 (DIVISION ST.) NORTH APP. 20 KM.
CROSS LOUGHBOROUGH LAKE BRIDGE, TURN LEFT ON TO
COUNTY RO. #5 GO 3/4 KM. LOT ON LEFT.

10. I certify that the above information is complete and correct and that, if approved, the work will conform with Provincial requirements for sewage systems and local Municipal By-Laws. (Attach fee for Class 4, 5 or 6 systems)

Name of Agent _____ Tel. No. _____ Signature of Owner or Agent Richard W. Lees
 Address _____ Date July 23/1990
 (No., Street)
 City, Town, etc.) _____

11. INSPECTOR'S REPORT		Inspection Time and Date	Sub-Surface Conditions Encountered	
Weather	Representing Owner	<u>12:40 AM</u> <u>JULY 31</u> 19 <u>90</u>	Rock & G.W.T.	Elevation
OVERCAST REQUIREMENTS	<u>RICHARD LEES</u>	Leaching Bed Design Criteria		Soil Type
		Depth to Rock	Depth G.W.T.	<u>TOPSOIL</u>
		<u>0.4</u> M	<u> </u> M	0 m
		Working Capacity of Septic/Holding Tank	0.3 m	
Lineal Metres of Distribution Pipe	<u>FILTER MEDIUM BED</u>	Working Capacity of Septic/Holding Tank	0.6 m	
		Litres	1.0 m	
			1.2 m	
			1.5 m	

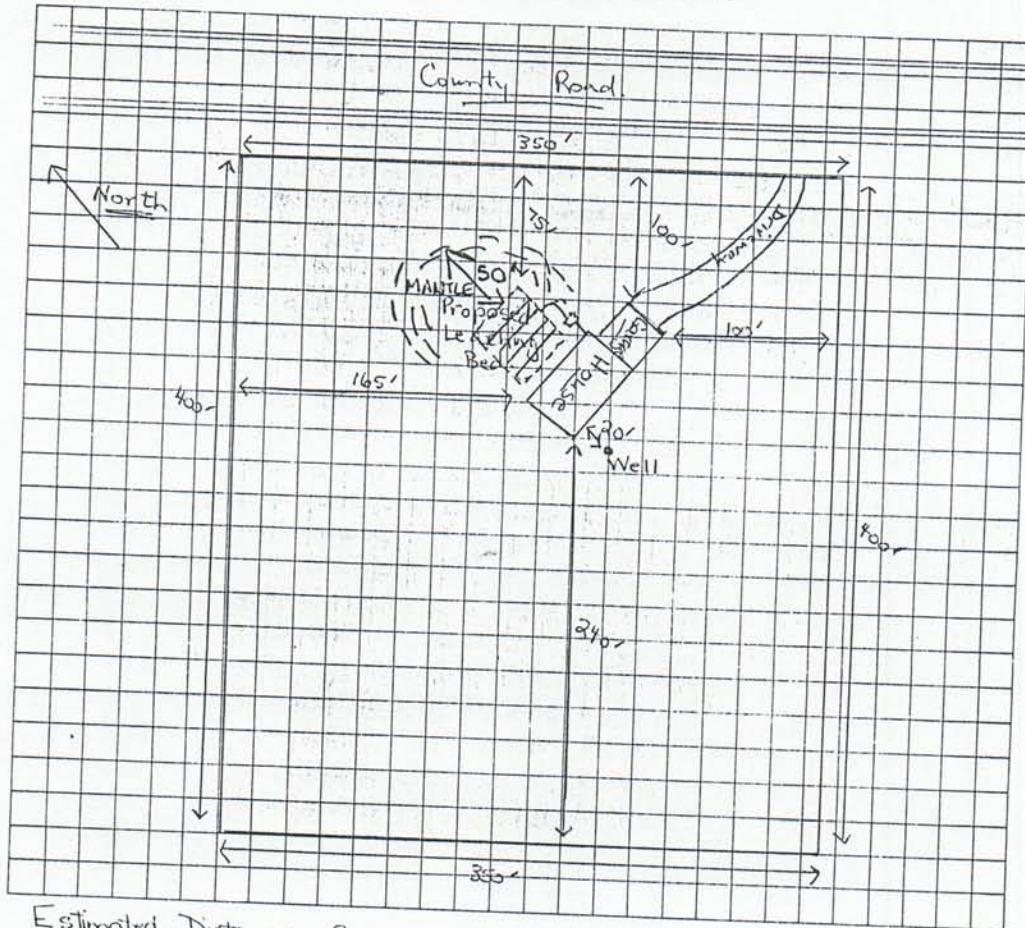
The surface of the leaching bed must be shaped to shed water and seeded or sodded.

Conditions of Approval and Reasons (e.g. fill, grading, drainage improvements, design sewage flows)
 OR

- Reasons where proposal not Acceptable (add additional pages if required) :
- ① Remove vegetation - grade area level
 - ② Filter medium bed 18 FT x 23 FT x 30" 6 RUNS OF 20 FT each.
 - ③ Extend mantle in direction of flow See diagram
 - ④ Keep bed a min. of 24 feet from house

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12. **LOT DIAGRAM AND SEWAGE SYSTEM PLAN:** - Draw to scale indicating north point and showing:
- a) Location of sewage system components (e.g. tanks, leaching bed). Locate and show horizontal distances from system to adjacent existing or proposed buildings, water supplies (including neighbours), existing on-site sewage systems, driveways, property lines, lakes, rivers, water courses, swimming pools.
 - b) Lot dimensions, topographic features (e.g. swamps, steep slopes) near system.
 - c) If any part of proposal conforms to a specific standard drawing, give reference number(s).



Estimated Distance of nearest neighbor's well is 500 - 600' to the east of propose sewage system sight.

13. I certify that the above sketch is complete and correct.

Date: July 23/90 Signature of owner or agent: Richard W Pees

14. A Certificate of Approval for this application is refused for the reasons given in Section 11 Page 1

INSPECTION AND RECOMMENDED BY	REFUSED	DATE
		DIRECTOR
CERTIFICATE OF APPROVAL		
Application approved and this Certificate of Approval under Section 65 of The Environmental Protection Act, is hereby issued for the proposal outlined on Pages 1 and 2 of the application and its attachments as amended by the requirements and conditions of Section 11 provided that the sewage system shall be completed and a Use Permit issued within 12 months of the issue hereof or such extended period as the Director on application allows. DO NOT OPERATE THE SYSTEM UNTIL A USE PERMIT IS ISSUED.		
INSPECTED AND RECOMMENDED BY	ISSUED	DATE
<u>[Signature]</u>	<u>D. Cooke</u>	<u>July 31/90</u>
	DIRECTOR	

Under Section 121 of The Environmental Protection Act, an applicant may appeal a decision by writing to the Director and to the Environmental Appeal Board, 112 St. Clair Ave. West, Suite 502, Toronto, Ont. M4V 1N3 within 15 days of receipt of the decision.