



USE PERMIT
FOR CLASS 4, 5, 6 SEWAGE SYSTEMS

APPLICATION NO.

79(8-91-32)15

INSPECTION DETAILS	TIME 11:16 am	DATE June 24/93	WEATHER Sunny/Warm
	THE OWNER		THE INSTALLER
REPRESENTING:			

1. Work authorized by the Certificate of Approval has been satisfactorily completed and includes:

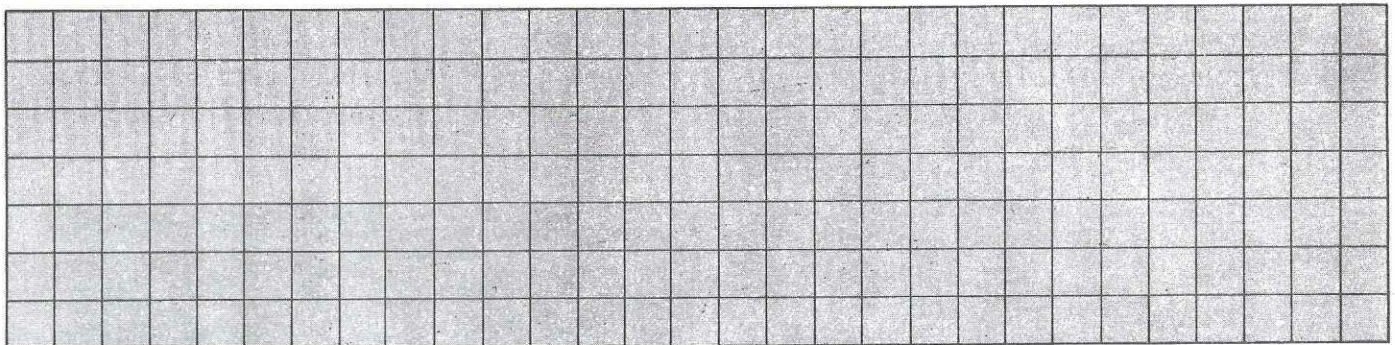
- a) Septic tank/~~holding tank~~ of working capacity of 4500 Imp. Gals. constructed of steel ☐ concrete ☒ fiberglass ☐
on site ☐ or prefabricated ☒ to serve 3 (no. of bedrooms or units).

MAKE AND MODEL,
IF PREFABRICATED TANK Boyd

- b) Leaching bed of total 120 ^m linear feet of 3 inch diameter distribution pipe of Canon
(type and product description e.g. manufacturer(s) and material of which pipe is made) laid
in 8 runs and fed by gravity (gravity, siphon, pump).
c) Proprietary Aerobic System: (Manufacturer) _____ (Model) _____
d) Other details _____

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

USE PERMIT

Under Section 67 of the Environmental Protection Act, and subject to the provisions of the Act and Regulations a Permit
is hereby issued to (Owner) Dale Kirkpatrick 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 849 Concession 1 Ward/Township/Municipality N. Gower
Region/District/County RMOC Plan No. M244 Sub-Lot No. 32

INSPECTED AND RECOMMENDED BY

[Signature]

PERMIT ISSUED BY

[Signature]

DIRECTOR

DATE ISSUED

6 Aug 93

Note: Section 64(a) of the Act provides that no change can be made to any building(s) or structure(s) in connection with which
this sewage system is used, if the operation or effectiveness of the sewage system will or is likely to be affected by
the change, unless a new Certificate of Approval is obtained.

Section 121 of the Act provides that an applicant for a permit may appeal a decision to refuse to issue a permit. Written
notice of appeal must be forwarded to the Director (who refused to issue the permit) and to the Environmental Appeal
Board, 112 St. Clair Avenue West, Suite 502, Toronto, Ontario M4V 1N3 within 15 days of receipt of a permit.

WARNING: UNDER NO CIRCUMSTANCES SHOULD A HOMEOWNER ENTER A SEPTIC TANK. NOXIOUS GASES WHICH
ARE HEAVIER THAN AIR REMAIN IN THE TANK AFTER THE TOP IS REMOVED, AND HAVE CAUSED DEATH BOTH TO THE
ORIGINAL VICTIM AND TO THOSE WHO ATTEMPT TO RESCUE HIM FROM THE TANK.



Do not complete
shaded areas.

Application No.	77(37-1-2015)
Fee Receipt No.	25752
Date Received	Apr 16 1993

Application Form And Certificate Of Approval For A Class 2 - 6 Sewage System

Personal information contained on this form is collected under the authority of the Environmental Protection Act, Part VII. It is used to facilitate the issuance of a Certificate of Approval as prescribed in Section 65 of the Act. Questions should be directed to the local Health Unit.

1. Name and address (number, street, city, town, etc.) of owner <i>Dale Kirkpatrick</i> <i>7666 Settlers Way</i> Tel No. <i>(63) -</i>	2. Name and address (number, street, city, town, etc.) of installer <i>Tom Healy</i> <i>Healy Garage</i> Tel No. <i>(63) 2585281</i>
---	---

3. Propose to *Install* a Class *10* sewage system to serve *Single*
(Construct/Install/Alter/Extend/Enlarge) (Facility: e.g. Single Family Dwelling, Motel, etc.)

4. Location - Region, County, District <i>Carleton</i>				Ward, Township, Town <i>Bedford</i> <i>Marlborough</i>		Lot No. <i>849</i>	Conc. No. <i>1</i>	Sub.Lot. No. <i>32</i>	Plan No. <i>M244</i>	Area of Lot (m ²) <i>200</i>
5. State No. of	Bedrooms or Motel Units	People	Flush Toilets	Urinals	Washbasins	6. Water Supply				
	<i>3</i>	<i>2</i>	<i>2</i>	<i>-</i>	<i>2</i>	<i>1-1</i>				
						Dug or Bored Well <input type="checkbox"/>				
						Drilled Well <input checked="" type="checkbox"/> Municipal <input type="checkbox"/>				
						Other				
						Proposed <input checked="" type="checkbox"/> or Existing <input type="checkbox"/>				

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

8. Relationship to Severance if applicable <input type="checkbox"/> Lot Approval Pending <input checked="" type="checkbox"/> Lot Approved Under Severance Application No.	9. Directions to Lot: - Highway No., Secondary Roads, Signs to Follow, etc. <i>Lot 32</i> <i>Bedford County</i> <i>Estates</i>
---	--

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.

Name of Agent <i>Healy</i>	Tel. No. <i>2585281</i>	Signature of Owner or Agent <i>Dale Kirkpatrick</i>
Address (No., Street, ... <i>B.R.#4</i> ...) City, Town, etc.) <i>Marlborough</i>		Date <i>Apr 16 1993</i>

11. INSPECTOR'S REPORT		Inspection Time and Date <i>11:30 AM</i> <i>Apr. 15</i> 19 <i>93</i>	Sub-Surface Conditions Encountered	
Weather <i>cloudy cool</i>	Representing Owner	Leaching Bed Design Criteria		Rock & G.W.T. Depth (m) Soil Type <i>silty sand loam</i>
		Depth to Rock	Design H.W.T.	
	 m. m.	
REQUIREMENTS	Length of Distribution Pipe (metres) <i>120 m</i>	Working Capacity of Septic/Holding Tank (Litres) <i>14500 l</i>		

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) ☐

App B #2
App C
App G



CofA approved on the basis of
more than 25 fixture units.

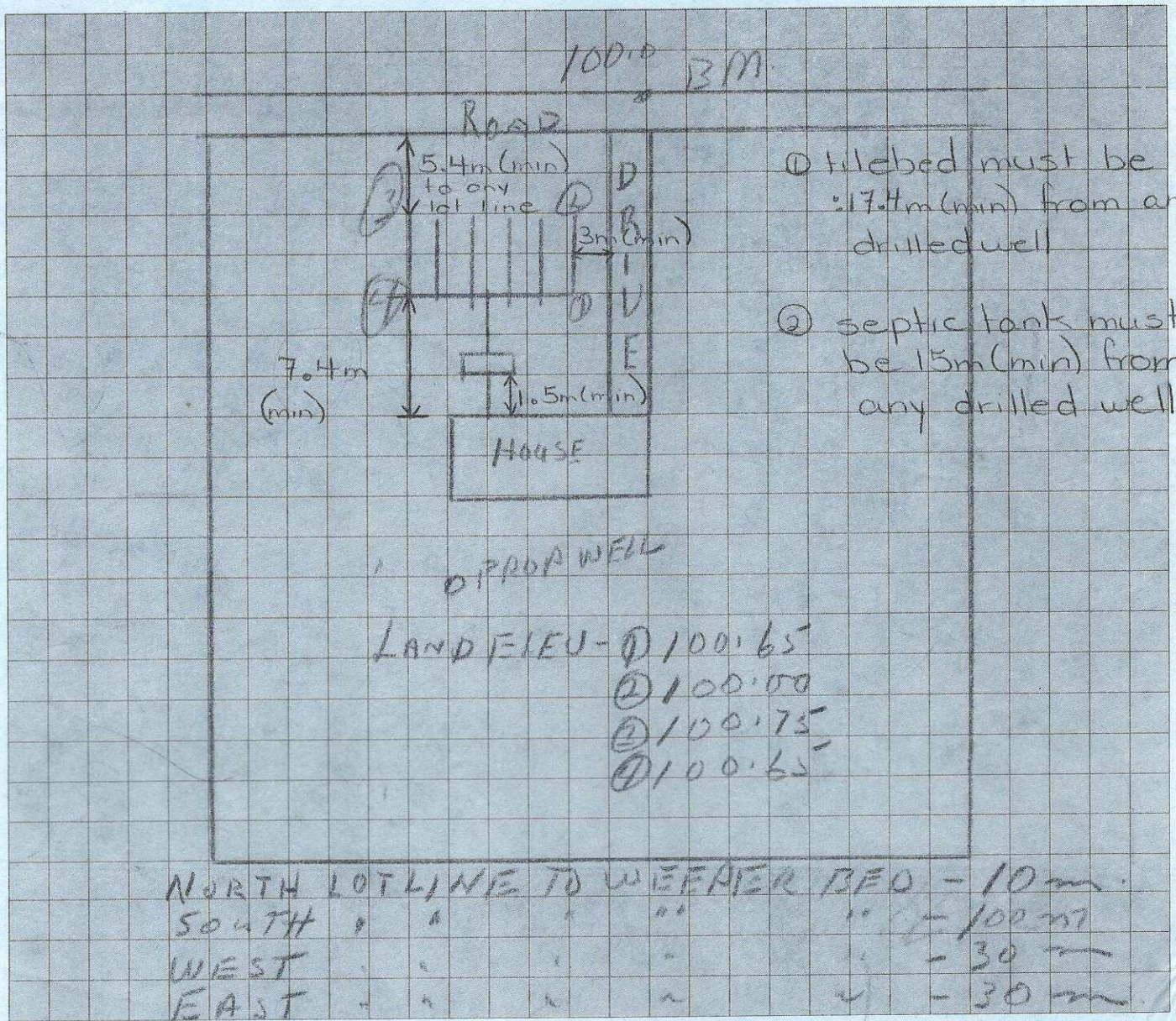
APPLICATION NO.

79(849-1-32)15

12. LOT DIAGRAM AND SEWAGE SYSTEM PLAN: — Draw to scale indicating north point and showing:

- 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.
- Lot dimensions, topographic features (e.g. swamps, steep slopes) near system.
- If any part of proposal conforms to a specific standard drawing, give reference number(s).

AN



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

INSPECTED 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

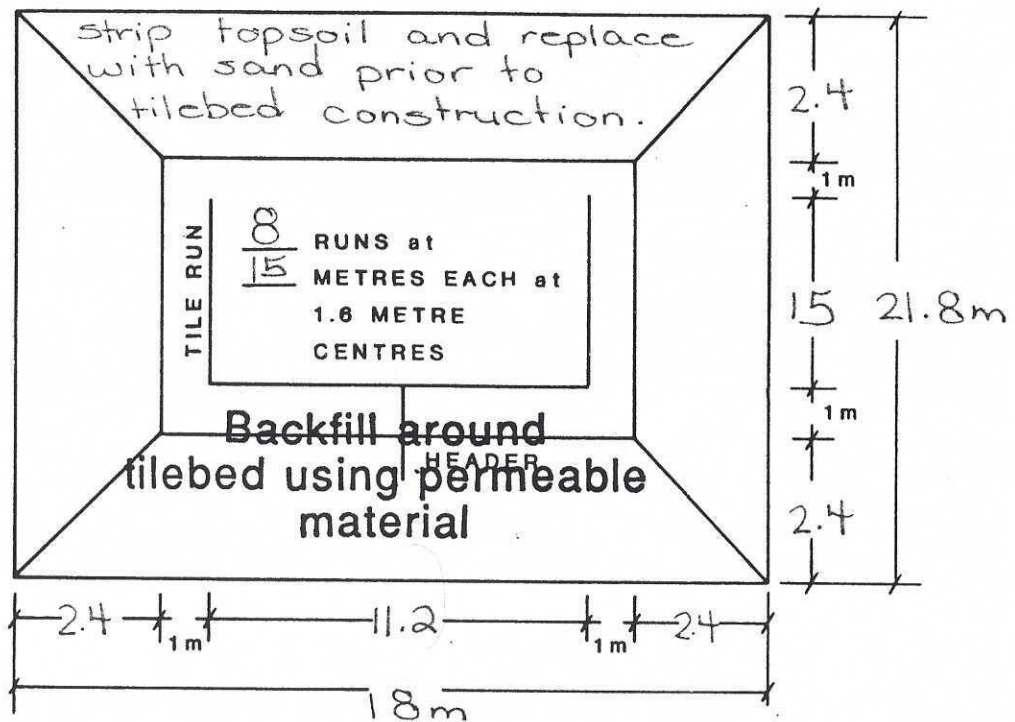
DATE

DIRECTOR

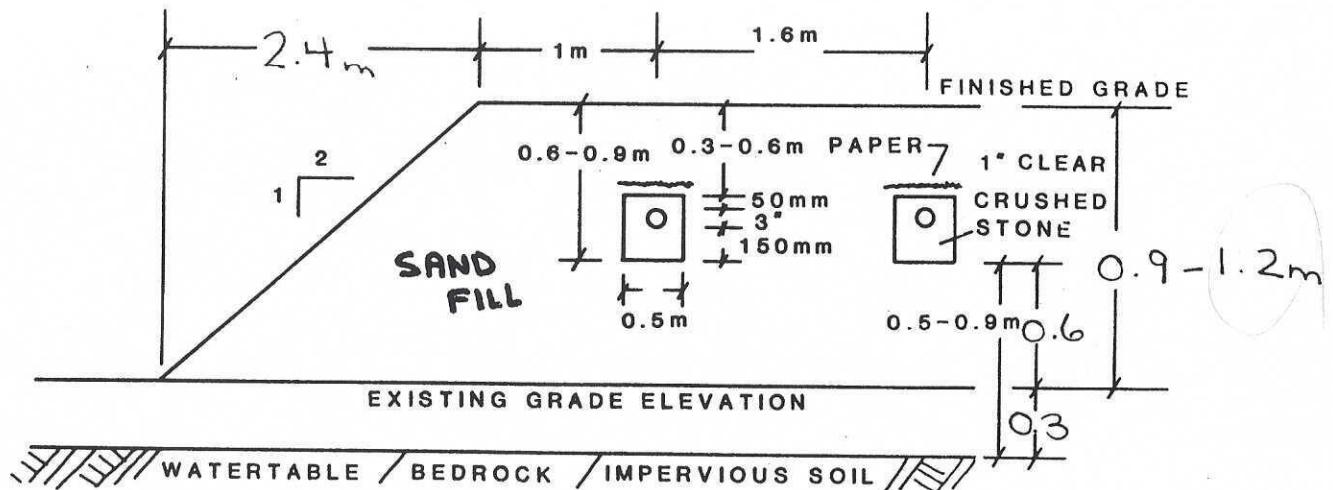
Under Section 121 of the Environmental Protection Act, an applicant may appeal a decision by writing to the Director and to the Environmental Appeal Board, 112 St. Clair Avenue West, Suite 502, Toronto, Ont., M4K 1N3 within 15 days of receipt of the decision.

TYPICAL DRAWING B
RAISED TILE BED - ABSORPTION TRENCH METHOD

PLAN



PROFILE



NOT TO SCALE

APPLICANT Dale Kirkpatrick
 MUNICIPALITY Marlborough
 LOT 849 CON. 1
 R. PLAN M244 S. LOT 32
 DATE 16 April 93 DIRECTOR [Signature]

APPENDIX "B"

Municipality Marlborough Application No. 79(849-1-32)15
R.P. M244 Sub Lot 32 Lot 849 Conc. 1
Property Owner Dale Kirkpatrick

PART I

Filter Medium for Class 4 and/or Class 6 Sewage Disposal Systems

Estimated Volume of Filter Sand required _____ cubic metres

Estimated Weight of Filter Sand required _____ kg

Amount Purchased: _____ Cubic Metres (Attach Weigh Bills)

I (we) certify that filter medium from an approved source, which conforms to the requirements of 374/81, was used for the installation of the tile bed on the above noted lot.

I (we) certify that the sewage system was installed in accordance with Ontario Regulation 374/81 governing the installation of sewage systems and the Certificate of Approval.

Signed: _____
Installer's Signature

Company Name

Date: _____
day/month/year

Class 1 Licence No.

PART II

Absorption Trench for Class 4 and/or Class 6 Sewage Disposal Systems

I (we) certify that the sewage system was installed in accordance with the Ontario Regulations 374/81 governing the installation of sewage systems and the Certificate of Approval.

Signed: _____
Installer's Signature

Company Name

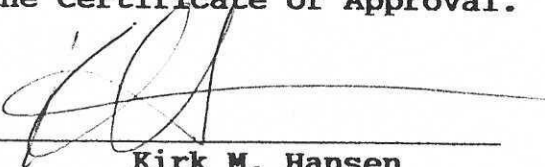
Date _____
day/month/year

Class 1 Licence No.

APPENDIX "C"

- ☒ install as per lot diagram page 2 and typical drawing B .
- ☒ appendix "B" must be completed and returned prior to the issuance of a use permit
- ☒ appendix "G" must be completed and returned prior to Use Permit inspection
- install as per Engineering Drawing(s) Number
- installation to be supervised by a consulting engineer with written certification that the system is installed as per Ontario Regulation 358 and the Certificate of Approval.

16 April 93
Date


Kirk M. Hansen
Director

APPENDIX "G"

PRIVATE SEWAGE DISPOSAL SYSTEM INSTALLER'S AS BUILT REPORT

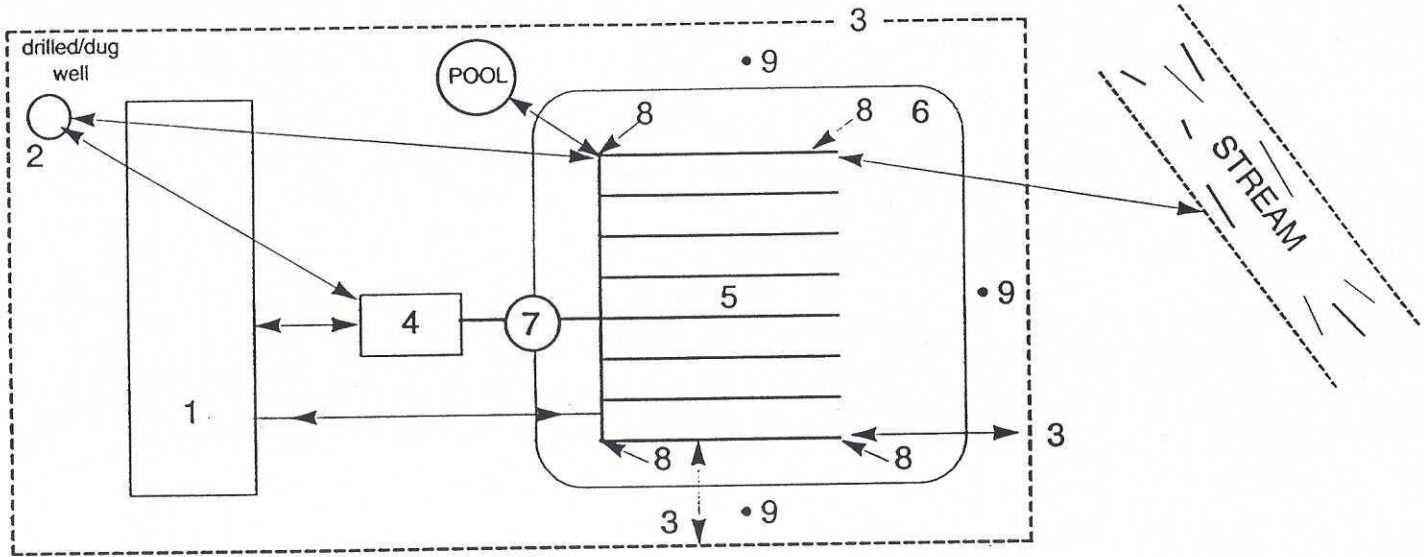
NOTE: The Use Permit Inspection will not be initiated until the approving Authority receives this report completed in full.

Permit #: 79(849-1-32)15 Applicant's Name: Dale Kirkpatrick

Installed By: _____ Date of Installation: _____

NOTE: The following must be detailed on the back of this sheet as per the example below.

- | | |
|--------------------------|---|
| 1. structure | 6. mantle extension(s) |
| 2. well – dug or drilled | 7. pump chamber & distribution box (if applicable) |
| 3. property lines | 8. elevation of tile obvert (top of tile) at 4 outside corners |
| 4. septic tank | 9. original grade elevation reference on Certificate of Approval
(3 areas outside of fill mantle area to be shown) |
| 5. tile bed (show runs) | |



Septic Tank Volume: _____ Litres Diameter of Tile: _____

Septic Tank manufactured by: _____ Runs of _____ Metres each

Estimated "T" time of imported fill _____ min./cm.

The following measured horizontal distances must be shown in metric to the nearest centimetre:

- septic tank & tile bed to any well within 35 metres
- septic tank and tile bed to structure that is being serviced
- tile bed to any structure (including pools, driveways) if less than 10 m.
- tile bed to property lines. If greater than 15 m. show > 15 m.
- tile bed and septic tank to stream/municipal/water body if applicable

NOTE: Before submitting this report, the applicant or agent must ensure the following conditions have been met:

- 1) The well is installed;
- 2) The immediate area surrounding the tile bed or filter bed is free of excavated impermeable material (i.e.) clay, silt);
- 3) The permeable, backfill required between the trenches and the finished grade and the material needed to establish the mantle (if requested) is adjacent to the system.

I hereby certify that the septic tank system as described in this report was installed in accordance with the Regulations and the Certificate of Approval No. _____.

Property Owner's Signature _____

Installer's Signature _____

Installer's Licence # _____