



WAYNE COUNTY
Health Department
 Where Caring Meets the Community

100 S. 5th Street
 Richmond, IN 47374
 765-973-9245
www.co.wayne.in.us
 Christine Stinson, Executive Director
 David Jetmore, M.D., Health Officer

**NEW COMMERCIAL ON-SITE SEWAGE SYSTEM
 APPLICATION**

Permit Fee: \$400.00 Receipt # _____

Date _____

Name of Project _____

ISDH Project # _____ (REQUIRED)

Owner's Name _____ Day Phone _____

Mailing Address: _____ City, St, Zip _____

E-Mall Address of Project Manager : _____ (Required)

Parcel ID _____ (Required)

Proposed OSS Property Address: _____

Civil Township _____

Legal Description: Section _____ Township; _____ Range _____

Register Installer: _____ Installer Phone: _____

APPROVED TYPE OF SYSTEM _____ GPD; _____

I hereby certify that the above information is correct and the sewage and drainage systems for this residence will be installed to meet or exceed the requirement of the laws of the Indiana State Department of Health and Wayne County, Indiana. I also understand this application is not a guarantee of the issuance of an onsite sewage disposal system permit and if a permit is denied or revoked I have the right to appeal the decision through the proper methods describe in Wayne County Ordinance . This application is void after one year

Applicant Signature: _____ Date _____

THIS IS NOT A PERMIT. THE SEPTIC PERMIT. THE PERMIT WILL BE ISSUED ONLY AFTER THE WCHD HAS RECEIVED AND REVIEWED THE ISDH APPROVAL LETTER AND DESIGN

**** A satisfactory finial OSS inspection (including alarm checks) must be obtained before scheduling your final building inspection for occupancy.**

For Office Use Only

Approved / Disapproved