

CHEROKEE COUNTY ENVIRONMENTAL HEALTH
APPLICATION FOR ON-SITE SEWAGE MANAGEMENT SYSTEM

Property Owners Name: _____

Property Address: _____ **Home #:** _____

_____ **Work #:** _____

_____ **Cell #:** _____

_____ **Zip Code** _____ **Fax/ Email:** _____

Builder/Contractor Name & Phone # _____

Subdivision Name: _____ **Lot Number:** _____

Detailed Directions to Property (Include Mailbox #'s and Distances) *Note: There will be an **Extra Trip Charge** if the inspector is unable to find the site based on these directions. You may use the back of this page to continue directions, if needed.*

TYPE OF STRUCTURE: Check One

_____ **RESIDENTIAL**

Lot Size/Acreage: _____ **Square Footage** _____ **No. of Bedrooms:** _____

Basement _____ (Circle One) with or without plumbing **Crawl Space** _____ **Slab** _____

Garage: Yes No (Circle One) Attached or Detached

Water Source: Public Water or Well **Pool:** Yes No **Bonus Room:** Yes No

Garbage Disposal: Yes No **Driveway:** (Circle All that Apply) Left Right Front Back

_____ **COMMERCIAL**

Lot Size/Acreage: _____ **Square Footage** _____ **Gallons per day** _____

No. of Users/Employees _____ **No. of Units/Chairs/Seats** _____

THE FOLLOWING ITEMS MUST BE PROVIDED AT TIME APPLICATION IS MADE:

1. LEVEL III SOILS REPORT (if in subdivision, can be obtained from developer).

2. RECORDED PLAT OF PROPERTY

3. **8.5X11** FLOORPLAN OF HOUSE (including all levels of house and garage).

*House Location **MUST** be **MARKED** on the Property

*House Location shall be drawn on Level 3 Soils Survey Plat, including driveway location

***ALL** Property Lines **MUST** be marked approximately every 50ft.

***.NOTE:** There shall be **NO GRADING, CUTTING OR FILLING OF LOT** until permit(s) has/have been issued.*

I hereby apply for a permit to install or construct an Individual On-Site Sewage Management System and agree that the system will be installed to conform to the requirements of the Georgia Department of Public Health, Chapter 511-3-1 and current Cherokee County Board of Health requirements. I understand that final inspection is required and hereby promise to notify the Cherokee County Environmental Health Department at 770-479-0444 upon completion and before final cover to the OSSMS. I further realize and understand this permit, soil evaluation, nor final inspection in any way guarantee the proper operation of the sewage system nor in any way confers any guarantee or warranty of any kind. Furthermore, said representatives do not, by any action taken in effecting compliance with these rules, assume any liability for damages which are caused, or which may be caused, by the malfunction of such system.

ALLOW TWO WEEKS FOR SITE REVIEW

Applicant Signature: _____ **Date** _____