**HOPKINS COUNTY ENVIRONMENTAL QUALITY**  
ON-SITE SEWAGE FACILITY  
TECHNICAL INFORMATION FOR PERMIT

**DO NOT BEGIN CONSTRUCTION PRIOR TO APPLICATION APPROVAL**  
UNAUTHORIZED CONSTRUCTION CAN RESULT IN PENALTIES

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**PROPERTY OWNER’S NAME**

- [ ] New House /w New System
- [ ] Replace System
- [ ] Upgrade System

Professional design required: [ ] Yes   [ ] No   If Yes, professional design attached: [ ] Yes   [ ] No

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I. **SEWER (House Drain)**

Type and Size of Pipe_________________________     Slope of Sewer Pipe to Tank____________________

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II. **DAILY WASTWATER USAGE RATE: Q=_____________(GALLONS PER DAY)**

Water Saving Devices: [ ] Yes   [ ] No

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III. **TREATMENT UNIT:  [ ] SEPTIC TANKS   [ ] AEROBIC UNIT   [ ] OTHER**

- Tank Dimensions_________________________     Liquid Depth (Bottom Of Tank to Outlet)________________
  
  (R & H or L, W & H)     (Inches)

- Size Required_________________________ (Gallons)     Size Proposed_________________________ (Gallons)

- Manufacture_________________________ Model #____________     Distributor_________________________

- Type Material of Tank_________________________     Pretreatment Tank Required: [ ] Yes   [ ] No

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III. **DISPOSAL SYSTEM**

- Type: [ ] Conventional     [ ] Panels     [ ] Surface Application     [ ] Drip     [ ] Gravel-less Pipe     [ ] E-Z Lay     [ ] LPD

- Area Required_________________________     Area Proposed_________________________

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IV. **ADDITIONAL INFORMATION**

**Note:** THIS INFORMATION MUST BE ATTACHED FOR REVIEW TO BE COMPLETE.

- Site Evaluation
- Planning Materials
- Design

THE ATTACHED CHECKLIST DETAILS THOSE ITEMS THAT MUST BE ADDRESSED UNDER EACH OF THESE CATEGORIES.

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Designer’s Signature_________________________     Registration #_________________________     Date_________________________