



Please Complete, Print, Sign and Return To Environmental Programs

WORCESTER COUNTY ENVIRONMENTAL PROGRAMS
INTERIM WASTEWATER DISPOSAL PERMIT APPLICATION

One West Market Street, Room 1306 Government Center, Snow Hill, MD 21863, 410-632-1220

Permit Number \_\_\_\_\_ Expiration Date \_\_\_\_\_

PROPERTY OWNER INFORMATION

Name \_\_\_\_\_
Current Mailing Address \_\_\_\_\_
Town/City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_
Daytime Phone # \_\_\_\_\_ Cell Phone # \_\_\_\_\_
Property Address (if different from mailing address) \_\_\_\_\_
Email Address \_\_\_\_\_ Tax ID # \_\_\_\_\_ Map \_\_\_\_\_ Parcel \_\_\_\_\_ Lot \_\_\_\_\_
New System Replacement System Addition to System Full System Fee (\$375) Tank Only Fee (\$180)

System Design Information

Residential

(Please list number of fixtures below)

Bedrooms meeting building code \_\_\_\_\_
Bathrooms \_\_\_\_\_
Washing Machines \_\_\_\_\_
Garbage Disposal (NOT RECOMMENDED) \_\_\_\_\_
Water Conditioner (See #4 below) \_\_\_\_\_
Oversize/Whirlpool Tub \_\_\_\_\_
Indoor Jacuzzi/ Hot Tub (NOT RECOMMENDED) \_\_\_\_\_

Commercial

(Fill in what is applicable)

Type of Facility \_\_\_\_\_
Number of Employees \_\_\_\_\_
Seating Capacity \_\_\_\_\_
Hours of Operation \_\_\_\_\_
Square Footage of Building \_\_\_\_\_
Retail S.F. \_\_\_\_\_ Office S.F. \_\_\_\_\_ Storage S.F. \_\_\_\_\_
Other \_\_\_\_\_

Permit Requirements/Owner Information

(Please read before signing below)

- (1) The 10,000 square foot sewage disposal area, or initial and replacement areas, shall not be covered by asphalt or concrete...
(2) The septic tank should be pumped by a licensed septic hauler at least every 2-3 years...
(3) The system shall be maintained so as to prevent washouts, surface pooling...
(4) Water treatment or softener backwash SHALL NOT be connected to this system.

- I. I certify that the information provided above, especially the number of bedrooms, is accurate.
II. This permit is an INTERIM permit; and that I or any future owners must discontinue use of this individual septic system...
III. I understand that by signing this application, I give Worcester County Environmental Programs right of access to my property...

PROPERTY OWNER'S SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

Approved Design Information

(Design is on file with this office)

Standard Trench Sand Lined Trench Seepage Bed Sand Mound
Installer: \_\_\_\_\_

Environmental Programs

(For office use only)

PERMIT APPROVAL \_\_\_\_\_ DATE \_\_\_\_\_

FINAL INSPECTION APPROVAL \_\_\_\_\_ DATE \_\_\_\_\_