



IJD Inspections Ltd.
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 www.ijd.ca

PERMIT # _____

PRIVATE SEWAGE DISPOSAL PERMIT APPLICATION FORM

Permit Applicant: Owner Contractor Application Date (mm/dd/yyyy): _____
 New Home Warranty No.(if applicable): _____ Estimated Project Completion Date (mm/dd/yyyy): _____

Owner Name: _____ **Mailing Address:** _____
 City: _____ Province: _____ Postal Code: _____ Phone: _____
 Cell: _____ Email: _____ Fax: _____

Contractor Name: _____ **Mailing Address:** _____
 City: _____ Province: _____ Postal Code: _____ Phone: _____
 Cell: _____ Email: _____ Email: _____

Project Location- Municipality: Town of Crossfield Subdivision/Hamlet: _____
 Street/Rural Address: _____ Lot: _____ Block: _____ Plan: _____
 Legal Subdivision: Part of: _____ Section: _____ Township: _____ Range: _____ West of: _____ M

Description of Work:

Submit with Application: Soil Log Report (2 test pits) Soil Analysis System Diagram CSA-B66 Certificate Site Plan/Diagram
 Work has not started Work is in progress Work is complete

TYPE OF OCCUPANCY	INSTALLATION	TREATMENT DISPOSAL METHODS
<input type="checkbox"/> Residential <input type="checkbox"/> Conventional <input type="checkbox"/> Advanced <input type="checkbox"/> Commercial <input type="checkbox"/> Conventional <input type="checkbox"/> Advanced <input type="checkbox"/> Industrial <input type="checkbox"/> Conventional <input type="checkbox"/> Advanced <input type="checkbox"/> Work Camp/No. of Men _____	<input type="checkbox"/> New <input type="checkbox"/> Alteration Expected Volume of Effluent: _____ <input type="checkbox"/> m ³ /day <input type="checkbox"/> Litres/day <input type="checkbox"/> Gallons/day(not to exceed 25 m ³ /day) No. of Bedrooms _____ (residential including basement and future development)	Complete all applicable items: <input type="checkbox"/> Septic Tank Size _____ Serial No.: _____ <input type="checkbox"/> Holding Tank Size _____ Serial No.: _____ <input type="checkbox"/> Treatment Mound Size _____ (sand Layer) <input type="checkbox"/> Ft ² <input type="checkbox"/> M ² <input type="checkbox"/> Disposal Field Size _____ (trench bottom) <input type="checkbox"/> Ft ² <input type="checkbox"/> M ² <input type="checkbox"/> Depth of Water Table _____ <input type="checkbox"/> Feet <input type="checkbox"/> Inches <input type="checkbox"/> Open (surface) Discharge <input type="checkbox"/> Sewage Lagoon <input type="checkbox"/> Packaged Sewage Treatment Plant <input type="checkbox"/> Sand Filter <input type="checkbox"/> Other: _____

Permit Applicant Declaration: The permit applicant/owner acknowledges that as per Section 12(2) of the Alberta Safety Codes Act, IJD Inspections Ltd. is not liable for any decision related to the system of inspections, examinations, evaluations and investigations including but not limited to a decision relating to their frequency and the manner in which they are carried out. The personal information provided as part of this application is collected under the SCA and the Municipal Government Act and in accordance with the Freedom of Information and Protection of Privacy Act. The information collected is required and will be used for issuing permits, safety codes compliance verification and monitoring and property assessment purposes.

Installer's Name (print) _____ **x** Installer's Signature _____ **OR x** Homeowner's Signature (homeowner permit only) Homeowner Declaration:
 By signing this I hereby certify that I own/will own and occupy this dwelling.

Private Sewage Installer's Certification Number: PS: _____

PERMIT FEE SUMMARY			
Permit Fee:	\$ _____	New Adjusted Fee	\$ _____
Travel Fee:	\$ _____	Adjusted SCC Levy	\$ _____
SCC Levy:	\$ _____	Subtotal	\$ _____
Total Permit Cost	\$ _____	Total Credit/Refund	\$ _____
Receipt#	_____	Receipt #	_____
<input type="checkbox"/> Cash <input type="checkbox"/> E-Transfer (to: permits@ijd.ca) <input type="checkbox"/> Cheque <input type="checkbox"/> Debit <input type="checkbox"/> Credit Card			

NOTE: This form **MUST** be signed by either the Homeowner (homeowner permits) or the Contractor (contractor permits).
 Ensure ALL required documents accompany this application form: [PSDS-Permit-Application-Document-Checklist.pdf \(ijd.ca\)](#)
 Contractors are required to obtain a **Business License** through the Town of Crossfield
 Email this completed form to: permits@ijd.ca