

**FAIRFAX COUNTY HEALTH DEPARTMENT
PERMIT APPLICATION**

MARK ALL APPLICABLE BOXES:

NEW CONSTRUCTION SEWAGE DISPOSAL SYSTEM PERMIT INDIVIDUAL WELL WATER SUPPLY PERMIT
 ADDITION/REMODELING WELL ABANDONEMENT SEWAGE SYSTEM EXPANSION

TO BE COMPLETED BY THE APPLICANT. PLEASE PRINT CLEARLY

OWNER _____ ADDRESS _____ PHONE _____
_____ ZIP _____

AGENT _____ ADDRESS _____ PHONE _____
_____ ZIP _____

SUBDIVISION _____ SECTION _____ BLOCK _____ LOT _____

PROPERTY ADDRESS _____ TAX MAP _____

RESIDENTIAL

Sewage: Septic Tank Public Other _____ Basement – Plumbing in Basement Yes No

Number of Potential Bedrooms _____ Number of Kitchens _____

Water: Well Public Other _____

COMMERCIAL

Sewage: Septic Tank Public Other _____ Estimated Number of Patrons _____ using sanitary facilities;

Number of Employees _____ using sanitary facilities; Total Estimated Daily Water Usage _____ Gallons

Water: Well Public Non-Community Other _____

DESCRIBE CONSTRUCTION: _____

I GIVE PERMISSION TO THE HEALTH DEPARTMENT TO ENTER ONTO THE PROPERTY DESCRIBED FOR THE PURPOSE OF PROCESSING THIS APPLICATION. I UNDERSTAND A SUBSTANTIAL PHYSICAL CHANGE TO THE PROPERTY MAY VOID APPROVAL OF THE LOT FOR AN ONSITE SEWAGE DISPOSAL SYSTEM.

SIGNATURE _____ PRINT NAME _____

DATE _____ OWNER AGENT

For Department Use Only

HD: ID:NO: _____

Date Lot Approved: _____ Type System _____ Design for _____ Bedrooms or _____ Gallons per Day

Perc Rate _____ Depth _____ Septic Tank Gallons _____ Absorption Field _____ (Lin. Ft.) Reserve Area _____ (Lin. Ft.)

Building Permit Number _____ Receipt Number _____

Remarks _____

REVIEWED BY _____ TITLE _____ DATE _____

**THE FOLLOWING INFORMATION IS REQUIRED
FOR A COMPLETE SUBMISSION PACKAGE:**

Grading Only Plans:

- ___ 9 copies of the site/grading plan
- ___ Special "Grading Only" Notice on each copy

First Submission of Site/Grading Plans for Building Permit

- ___ 9 copies of site/grading plan
- ___ 1 copy of site/grading plan on 11" x 17" sheet
- ___ 2 copies of pump plans or hydraulic designs (if required for design)
- ___ 1 copy of architectural plan (floor plan)

Revisions To Site/Grading Plans

- ___ 9 copies of site/grading plan
- ___ 1 copy of site/grading plan on 11" x 17" sheet
- ___ 2 copies of pump plans or hydraulic designs (if changes to design are made)

**Building Additions and Pool Reviews (with less than 2500 ft²
site disturbance)**

- ___ Fairfax County Building Permit Application
- ___ 2 copies of site plan (1:50 scale minimum)
- ___ 1 copy of architectural plans

**Building Additions and Pool Reviews (with 2500 ft² or greater
site disturbance)**

- ___ Fairfax County Building Permit Application
- ___ 9 copies of site/grading plans
- ___ 1 copy of architectural plans

NOTE: If the plans are rejected the Engineer listed on the plans will be contacted with an explanation for the rejection, regardless of whom submitted the plans

The information required for the complete submission package has been provided to the Health Department for review

(signature of owner or agent)

(date)