

**Labette County Environmental Department  
Application for a Wastewater System Permit  
Application Fee: \$100.00**

The undersigned hereby applies for a permit to install a private wastewater system according to the description and the specifications submitted herewith, the undersigned agrees that such work will be done as described and will comply and be maintained with all applicable statutes of the State of Kansas and all applicable ordinances of Labette County, KS.

**Owner(s):** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

**City and Zip Code:** \_\_\_\_\_

**Home Phone:** \_\_\_\_\_ **Cell Phone:** \_\_\_\_\_

**Physical or 911 Address:** \_\_\_\_\_

**City and Zip Code:** \_\_\_\_\_

**Payment Method:** Cash \_\_\_\_\_ Card \_\_\_\_\_ Check \_\_\_\_\_/Ck# \_\_\_\_\_

**Is this system located in a floodplain?** Yes  No

**Is this system located on applicant's property?** Yes  No

**Residential:** Number of bedrooms \_\_\_\_\_ Number of persons in household \_\_\_\_\_

Lot size/acreage \_\_\_\_\_

Estimated water usage \_\_\_\_\_

**Commercial:** Proposed use of building \_\_\_\_\_

Number of employees \_\_\_\_\_ Number of bathrooms \_\_\_\_\_

Number of work shifts in 24 hr period \_\_\_\_\_

Estimated was usage (gal/mo) \_\_\_\_\_

*I hereby certify the information shown hereof is true and accurate as to the type of system to be installed and its location on the property hereon described. The applicant is required to phone the Health Dept prior to any construction for a pre-site inspection if needed or wanted by the applicant.*

\_\_\_\_\_  
**Signature of Landowner**

\_\_\_\_\_  
**Date**

**Contractor installing the system:** \_\_\_\_\_

Permits must also have a drawing of the current (or proposed) structures on the property before the permit will be issued. The drawing does not have to be to scale but needs to show the proposed location of the work to be done or the items to be installed. Please use other side for the drawing.