



**APPLICATION: Residential/Commercial**

**Service Requested - Mark all that apply**

<input type="checkbox"/> Well New	<input type="checkbox"/> Septic Replacement	<input type="checkbox"/> Type III Well	<input type="checkbox"/> Irrigation
<input type="checkbox"/> Well Replacement	<input type="checkbox"/> Septic Tank Only (replacement)	<input type="checkbox"/> Commercial Septic (> than 1,000 gpd)	<input type="checkbox"/> Irrigation (LQW)
<input type="checkbox"/> Septic New	<input type="checkbox"/> Vacant Land Evaluation	<input type="checkbox"/> Commercial Septic (< than 1,000 gpd)	

**Property Information**

Property Parcel #:	County:	Township:	
Street Address:	City	State:	Zip:
Subdivision:	Lot #:	Section:	
Property Dimensions (if known):	or Acreage:	If less than 1 acre, did the land division occur after July 28, 1997? <input type="checkbox"/> Yes <input type="checkbox"/> No	

**Owner Information (current or prospective)**

Name:	City:
Mailing Address:	State: Zip:
Email:	Phone: Fax:
Preferred Delivery Method of Permit/Report: <input type="checkbox"/> E-Mail <input type="checkbox"/> Mail <input type="checkbox"/> Will Pick Up <input type="checkbox"/> Fax	

**Contractor/Other Information:**

Contractor/Other Name:	City:
Mailing Address:	State: Zip:
Email:	Phone: Fax:
Preferred Delivery Method of Permit/Report: <input type="checkbox"/> E-Mail <input type="checkbox"/> Mail <input type="checkbox"/> Will Pick Up <input type="checkbox"/> Fax	

**Residential Information (required)**

Number of Bedrooms (include all lofts used as bedrooms) \_\_\_\_\_ check one:  1  2  3  4 more (#) \_\_\_\_\_  N/A

Is there an existing septic system? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, size of tank _____	Is there or will there be a water softener installed? <input type="checkbox"/> Yes <input type="checkbox"/> No
Is there an existing outhouse or privy? <input type="checkbox"/> Yes <input type="checkbox"/> No	Is there or will there be a whirlpool or hot tub installed? <input type="checkbox"/> Yes <input type="checkbox"/> No
Is there or will there be a garbage disposal unit or grinder pump? <input type="checkbox"/> Yes <input type="checkbox"/> No	Will there be basement plumbing? <input type="checkbox"/> Yes <input type="checkbox"/> No
Are there any buried or above ground fuel tanks other than propane gas? <input type="checkbox"/> Yes <input type="checkbox"/> No	Will the well be used for commercial business use? <input type="checkbox"/> Yes <input type="checkbox"/> No
	Will or does the water well serve two or more homes? <input type="checkbox"/> Yes <input type="checkbox"/> No

Are there any existing wells on the property which have not been properly plugged as required by State law?  Yes  No

I, the property owner, or the owner's authorized representative (*duly empowered by the property owner with authority granted to me by him/her to officially act in place of, or on his/her behalf in the submission of this application.*) hereby grant to District Health Department #10 representatives' permission to access and enter the above-described parcel; to perform all necessary tests and inspections. All information provided in this application is accurate, true, and correct to the best of my knowledge. By signing below, I further agree to install, or cause to be installed, any hereafter permitted water supply system and/or sewage treatment facilities in accordance with specified permit conditions issued - including the regular requirements of District Health Department #10's Sanitary code, and where applicable with other state laws, rules, or regulations.

\_\_\_\_\_  
 Owner or Representative Signature

\_\_\_\_\_  
 Date

**Note:** a site plan and directions to the property are required. Please complete the back of this form and attach all appropriate documentation. **IF INCOMPLETE, THE APPLICATION WILL NOT BE PROCESSED AND WILL BE RETURNED.**

<b>OFFICE USE:</b> Septic Permit # _____	Well Permit # _____	Date Received: _____
<b>Provided to Client</b> <input type="checkbox"/> Comm. Addendum <input type="checkbox"/> Water Bottles <input type="checkbox"/> Flags with Stakes/Ribbons	<b>Paid:</b> _____	

**Directions to Property**

Parcel #

Please include map if property is difficult to find

**Site Plan**

Please include and show all of the following in the Site Plan Area drawing:

- Prominent landmarks on or near the site (surface waters, fences, large trees, buildings, neighboring houses, etc.)
- Site or property boundaries
- Show location of buildings and driveway (proposed and existing)
- Show location of the proposed well and sewage treatment system and any existing well and or septic systems
- **Show the location of all buried electrical, water, gas or fuel lines**

Please show as much **detail** as possible in the space below

Please indicate  
**NORTH**



**Site Plan Area Drawing**

**District Health Department #10 Offices**

**CRAWFORD COUNTY**

501 Norway Street, Ste #1  
Grayling, MI 49738  
(989) 348-7800

[ehcrawfordcounty@dhd10.org](mailto:ehcrawfordcounty@dhd10.org)

**LAKE COUNTY**

5681 S. M-37  
Baldwin, MI 49304  
(231) 745-4663

[ehlakecounty@dhd10.org](mailto:ehlakecounty@dhd10.org)

**MASON COUNTY**

916 Diana Street  
Ludington, MI 49431  
(231) 845-7381

[ehmasoncounty@dhd10.org](mailto:ehmasoncounty@dhd10.org)

**MISSAUKEE COUNTY**

6180 W. Sanborn Road, Ste #1  
Lake City, MI 49651  
(231) 839-7167

[ehmissaukeecounty@dhd10.org](mailto:ehmissaukeecounty@dhd10.org)

**OCEANA COUNTY**

3986 N. Oceana Drive  
Hart, MI 49420  
(231) 873-2193

[ehoceanacounty@dhd10.org](mailto:ehoceanacounty@dhd10.org)

**KALKASKA COUNTY**

625 Courthouse Drive  
Kalkaska, MI 49646  
(231) 258-8669

[ehkalkaskacounty@dhd10.org](mailto:ehkalkaskacounty@dhd10.org)

**MANISTEE COUNTY**

385 Third Street  
Manistee, MI 49660  
(231) 723-3595

[ehmanisteecounty@dhd10.org](mailto:ehmanisteecounty@dhd10.org)

**MECOSTA COUNTY**

14485 Northland Drive  
Big Rapids, MI 49307  
(231) 592-0130

[ehmecostacounty@dhd10.org](mailto:ehmecostacounty@dhd10.org)

**NEWAYGO COUNTY**

PO Box 850, 1049 Newell  
Street White Cloud, MI 49349  
(231) 689-7300

[ehnewaygocounty@dhd10.org](mailto:ehnewaygocounty@dhd10.org)

**WEXFORD COUNTY**

521 Cobb Street  
Cadillac, MI 49601  
(231) 775-9942

[ehwexfordcounty@dhd10.org](mailto:ehwexfordcounty@dhd10.org)