

**MADISON HEALTH DEPARTMENT  
SEPTIC PERMIT APPLICATION**

**NOTE: AN INSTALLERS PROPOSAL OR ENGINEER'S DESIGN PLAN MUST ACCOMPANY APPLICATION.  
FOR NEW CONSTRUCTION, ONE SET OF BUILDING PLANS MUST ACCOMPANY APPLICATION.**

Date: \_\_\_\_\_

Application is hereby made for a permit to construct/repair/alter a subsurface sewage disposal system at:

\_\_\_\_\_  
(Street Address)

or:  
Subdivision and Lot \_\_\_\_\_ Size \_\_\_\_\_  
(Give dimensions)

\_\_\_ Residential House Number of Bedrooms \_\_\_  
\_\_\_ Other (type building) Describe: \_\_\_\_\_

**Check One:** New \_\_\_ Repair \_\_\_ Alteration \_\_\_  
Water Supply (Public / Private Well): \_\_\_\_\_

**Additional Information:**

Will there be any plumbing fixtures in the basement? \_\_\_\_\_ (If yes, provide details on plan or proposal.)

Will footing or foundation drains be installed? \_\_\_\_\_ (If yes, show location on plan or proposal.)

Will a curtain drain be installed? \_\_\_\_\_ (If yes, show location on plan or proposal.)

***NOTE: No garbage disposal or water softening units will be allowed to discharge into the septic system.***

Owner or Owner Agent's Name: \_\_\_\_\_ Phone \_\_\_\_\_

Address: \_\_\_\_\_

**PLEASE NOTE: ANY CHANGES FROM THE APPLICATION SUBMITTED MUST BE APPROVED IN ADVANCE BY  
THE MADISON HEALTH DEPARTMENT**

***I certify that I am the owner of this property or the legal representative of the owner.***

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Applicant's Phone Number: \_\_\_\_\_

\_\_\_\_\_  
Name of Septic Contractor: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Installer License No. \_\_\_\_\_

**COMPLETE REVERSE SIDE**

8 Campus Drive • Madison, CT 06443  
TELEPHONE: (203) 245-5618 • FAX: (203) 245-5613  
www.madisonct.org

**AN INSTALLER'S PROPOSAL OR ENGINEER'S DESIGN PLAN MUST ACCOMPANY THIS APPLICATION.**

**APPLICATION PLOT PLAN**

(For non-engineered systems)

1. Dimension of lot, all sides
2. Location of proposed or existing house or building from lot lines (sides, front and back)
3. Location of detached buildings and other structures
4. Dimensions of house (length and width)
5. Location of water service or well, driveway and swimming pool
6. Location and specification of proposed subsurface sewage disposal system
  - primary area (and reserve area, if required)
7. Location of any watercourses, footing drains, curtain drains, storm drains, ledge outcrops, severe slope, and outstanding land features, etc.
8. Location of soil tests (deep tests and percolation tests)
9. Minimum leaching system spread (MLSS) calculations (if not prepared by engineer)

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**AN OFFICIAL PLOT PLAN OR A PLAN DRAWN TO SCALE BELOW MUST BE SUBMITTED. (Include all items noted above or attach a file.)**