

Permit # _____

WABAUNSEE COUNTY ZONING
NOEL SYLVESTER, ZONING ADMINISTRATOR
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785-765-3432
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FINAL CHECKOUT WORKSHEET SEPTIC TANK & LATERALS / LAGOON

This permit is issued to:

Name _____ Landowner (If different) _____

Address _____ Address _____

Phone _____ Phone _____

For reconstruction / New system of a lagoon / septic tank and laterals

SYSTEM CONTRACTOR

Name _____

Address _____

Phone _____

SYSTEM LOCATION

Sec. _____ Township _____ Range _____

Site address _____

Lot Acres _____

THIS FORM IS NOT COMPLETE WITHOUT THE SKETCH OF THE FINISHED SYSTEM AND THE SIGNATURE .

Please attach a drawing.

The sketch shows the locations of the units comprising the sewage disposal system. It shows distance from buildings, trees, garage, fence posts, etc. and areas where perc test were conducted should show perc test location.

UNITS CONSTRUCTED

of Bedrooms _____

Septic Tank _____ Gallon

Rock, pipe, fabric lateral _____ Feet

Chamber lateral system _____ feet

PVC Sewer pipe house to tank _____ feet + tank to laterals _____ feet= Total Feet _____

Effluent Filter _____ Lift Station _____

MPI results: _____

OR

of Bedrooms _____

Lagoon Size: _____ Square _____ Rectangle _____ Total Depth: _____ Ft.

Top Dimensions: _____ X _____ Bottom Dimensions: _____ X _____

PVC Sewer Pipe: _____ Ft Septic Tank _____ Lift Station _____

Fence: _____ Ft. Seeding: _____ Ac.

Other Components: _____

System must be inspected, and form signed by County Sanitarian or his/her designated representative. All lateral field locations require a perc test, In the absence of a professional, applicant is allowed to conduct the following DIY perc test.

DIY Perc Test

1. Dig several holes throughout the proposed lateral field area. Holes should be at least 12 inches in diameter and 12 inches deep with straight sides.
2. Fill the hole with water and let it sit overnight.
3. The next day refill the hole with water.
4. Measure the water level by laying a straight edge across the top of the hole and using a tape measure or yardstick measure the depth of the water.
5. Measure the water level every hour until the hole is empty, noting the number of inches the water level drops per hour.

Perc rate is measured for septic purposes in Minutes Per Inch MPI. 60 minutes/inches drop = perc rate MPI.

COUNTY SANITARIAN _____

DATE _____