

**\*ALL PERMIT FEES ARE  
NON-REFUNDABLE  
\*ONE PERMIT PER SYSTEM  
\*PERMIT GOOD FOR ONE  
YEAR FROM DATE OF ISSUE**

**Fannin County Environmental Development  
On-Site Sewage Facilities  
Permit Application**

<u>For Office Use Only</u>	
Permit Number _____	
Date _____	
Amount Paid _____	Receipt # _____

**PLEASE PRINT**

**IN ORDER TO OBTAIN AUTHORIZATION TO CONSTRUCT,  
THIS APPLICATION MUST BE FILLED OUT COMPLETELY.**

Property Owners Name: \_\_\_\_\_  
(Last) (First) (MI) (Spouse/Other)

Driver's Lic. #: \_\_\_\_\_ Exp: \_\_\_\_\_ Driver's Lic. #: \_\_\_\_\_ Exp: \_\_\_\_\_  
(Property Owner) (Spouse/Other)

Mailing Address: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
(# & Street Name (or) P.O. Box) (City) (Zip)

Telephone Number: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
(Home) and (Work) and/or (Other)

Site Address: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
(911 Address Required) (City) (Zip)

Lot \_\_\_\_\_, Block \_\_\_\_\_, Subdivision \_\_\_\_\_, Unit # \_\_\_\_\_

Acreage \_\_\_\_\_, Survey Name \_\_\_\_\_, Abstract \_\_\_\_\_, Deed Volume \_\_\_\_\_, Page \_\_\_\_\_  
(Attach copy of your Warranty Deed, not previous owner)

Tract \_\_\_\_\_, Section \_\_\_\_\_, Property Tax ID# \_\_\_\_\_

**AFTER ALL REQUIRED DOCUMENTS ARE RECEIVED, PLEASE ALLOW 5 BUSINESS DAYS FOR APPROVAL AND  
ISSUANCE OF PERMIT**

Source of Water:     Private Well     Public Water Supply – Name: \_\_\_\_\_

Single Family Residence: Number of Bedrooms \_\_\_\_\_ Sq. Ft. \_\_\_\_\_ Permanent/Part-Time Residence  
(circle one)

Number of Bathrooms \_\_\_\_\_ Number of Occupants \_\_\_\_\_ New/Existing    Mobile Home-S/W – D/W  
(circle one) (circle one)

Water Saving Devices? Yes \_\_\_\_\_ No \_\_\_\_\_

Commercial/Institutional/Multi-Family: Type: \_\_\_\_\_

Name of Business: \_\_\_\_\_

No. of Employees/Occupants/Units: \_\_\_\_\_ Days Occupied Per Week: \_\_\_\_\_

Site Evaluator: \_\_\_\_\_ Registration No. & Type: \_\_\_\_\_ Phone: \_\_\_\_\_

Designer: \_\_\_\_\_ Registration No. & Type: \_\_\_\_\_ Phone: \_\_\_\_\_

Installer: \_\_\_\_\_ Registration No. & Type: \_\_\_\_\_ Phone: \_\_\_\_\_

I hereby certify under penalty of law that this application and any attachments contain no willful or negligent misrepresentation or falsification and that the information is true, accurate, and complete to the best of my knowledge. I understand that any misrepresentation or falsification may result in denial of my application. Authorization is hereby granted for Permitting Authority to enter the above described property for the purpose of lot evaluation and inspection of on-site sewage facility and related activities. A permit to operate will be granted following a successful inspection of the system.

\_\_\_\_\_  
 (Signature of Owner or Agent)

\_\_\_\_\_  
 (Date)

**\*FOR INSTALLATION & INSPECTION PURPOSES, PLEASE HAVE PROPERTY 911 ADDRESS  
VISIBLE\***

**\*\*PLEASE DRAW DIRECTIONS ON BACK FROM NEAREST TOWN\*\***