

Complete this form based on the intended final state of the property upon completion of building and development. Include rooms and fixtures from principal dwelling and any secondary dwelling(s) or dwelling unit(s) and include any developed basement(s).

Property Address _____ **Subdivision** _____

Legal description Lot _____ or Condo unit _____ Block _____ Plan _____
 (if applicable) Quarter _____ Section _____ Township _____ Range _____ Meridian 4 _____

Number of bedrooms (*includes basement if applicable*) Existing _____ Proposed to be added _____ Total _____

Number of bathrooms 2-piece _____ 3-piece _____ 4-piece _____ 5-piece _____ 6 or more piece _____

Number of kitchen sinks _____ Number of laundry tubs (*sinks*) _____

Number of washing machines (*laundry*) _____ Number of specialty baths/showers _____
(i.e. steam shower, jacuzzi, multiple head shower)

- | | | | | |
|--|--------------------------|-----|--------------------------|----|
| water well | <input type="checkbox"/> | Yes | <input type="checkbox"/> | No |
| water softener | <input type="checkbox"/> | Yes | <input type="checkbox"/> | No |
| reverse osmosis | <input type="checkbox"/> | Yes | <input type="checkbox"/> | No |
| garbage grinder or garburator | <input type="checkbox"/> | Yes | <input type="checkbox"/> | No |
| weeping tile drains into the sewage system | <input type="checkbox"/> | Yes | <input type="checkbox"/> | No |
| home based business | <input type="checkbox"/> | Yes | <input type="checkbox"/> | No |

If yes to the home based business, please describe:

To the best of my knowledge, no other water devices will be added to the premise Yes No

I hereby declare that I am the owner or one of the owners, or if the owner is a corporate entity, I am authorized on behalf of that entity, of the premise described above and on the attached Private Sewage Disposal (PSD) Permit Application and I certify that the information provided on this Private Sewage Disposal Landowner Confirmation of Information Form is true and accurate to the best of my knowledge.

 Print name Signature Date (yyyy-mm-dd)

Further, I hereby confirm that I have read the attached Private Sewage Disposal (PSD) Permit Application for my property and I certify that all statements provided are true and accurate to the best of my knowledge.

 Print name Signature Date (yyyy-mm-dd)

Collection and use of personal information

Personal information is being collected under the authority of s. 33 (c) of the *Freedom of Information and Protection of Privacy Act* and will be used in the management and administration of Strathcona County's planning and permitting processes. Information related to your permit application and/or permit(s) issued may be disclosed as allowed or required by law. If you have any questions about the collection, use or disclosure of your personal information, contact Manager, Permitting, Inspections and Customer Service, Planning and Development Services, Strathcona County at 780-464-8080.