## TOWN OF LITTLE FALLS

## APPLICATION FOR PERMIT TO CONSTRUCT, ALTER, OR ENLARGE A SEWAGE DISPOSAL SYSTEM

**REQUIRED:** Two sets of plans and specifications, including location of wells, property lines and buildings within 300 feet of the proposed system, along with this completed application.

1.	Applicant's Name	Phone	
	Mailing Address		
2.			
3.	Application is For New C	onstructionAlteration/Enlargement of Existing System	
	Number of bedrooms	Garbage GrinderYesNo	
4.	Topography of the Land		
	(i.e	., flat, rolling, steep, or gentle slope, etc.)	
5.	Nature of the Land		
	(i.e	. top soil, clay, loom, sand, gravel, etc.)	
	fied soil percolation test is requi- cations are required.	red. If the percolation test fails, then engineered plans and	
6.	Soil Percolation Test Performed I	py	
7.	Percolation Test Results		
8.	Date For Construction Start		
		Phone	
10.		ED)	
	All work shall be executed in strict compliance with the permit application, plans, the Uniform Fire		
	Prevention and Building Constructions which apply. This sev	ction Codes, Public Health Law, and all others laws, rules and wage disposal or septic permit does not constitute authority to otic system in violation of any federal, state or local law, or other	
Signatu	re of Applicant	Date	
		Date	
	is \$25.00 payable by money ord (All checks should be made out t	er or check. <b>NO CASH PAYMENTS ARE ACCEPTED.</b> o Sandra Regan, Town Clerk)	
Town C	Elerk: Sandra Regan 124 O'Hara Rd. Little Falls, NY 13365 315-823-2879	Codes Enforcer: Phil Green 315-315-534-2232	