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Interim report

CERTIFICATE OF INSTALLATION

Final report

On-site sewage system as built construction details

Notification number:

Notification or Approval information:

Approval number:

PID:

Date of Installation: _____

Notifier or applicant (QP/P.Eng)

QP/.Eng Contact:

Telephone:

Email:

Installer contact:

Telephone:

Email:

Service provider:
(for ATUs only)

Name:

Email:

Telephone:

System details

Design flow (L/day):

Intended use:

System type:

Length of trench (m):

Width of trench (m):

Sand speed(minutes):

Hydraulic conductivity(m/s):

As built clearance distances as illustrated on attached site plan

From Nearest	To Field	To Tanks	From Nearest	To Field	To Tanks	From Nearest	To Field	To Tanks
Lot Boundary	m	m	Cistern	m	m	Water Distribution	m	m
Downslope Boundary	m	m	Watercourse	m	m	Foundation Drain	m	m
Drilled Well	m	m	Wetland	m	m	Other	m	m
Dug Well	m	m	Intermittent Drain	m	m	Other	m	m

I confirm that the system was installed according to the *On-site Sewage Disposal System Regulations, Standard*, and the associated notification or approval.

Print name

Signature

Date

CERTIFICATE OF INSTALLATION
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Site plan must include drawing of lot layout illustrating the location of the system installed, direction of and % slope, location of structures (proposed or existing), watercourse(s), well(s) and other confining features identified in the Standard including required clearance distances, in relation to the system location.

may include separate attachment for site plan

DATE: _____ Professional engineer or qualified person: _____
(Signature)

QP or P. Eng. #: _____
(Print name)