

**THE TULALIP TRIBES**  
APPLICATION FOR ONSITE SEWAGE SYSTEM PERMIT

Property ID \_\_\_\_\_

New     Renewal     Redesign     Alteration     Revision     Repair     Waiver request

Applicant \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_

Installation Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_

Sec \_\_\_\_ Twp \_\_\_\_ Rg \_\_\_\_ 1/4Sec \_\_\_\_ Subdivision Name \_\_\_\_\_ lot \_\_\_\_ Blk \_\_\_\_

Water Supply:     Individual well     Public    System Name \_\_\_\_\_

\_\_\_\_\_ Onsite Sewage System Design Information \_\_\_\_\_

*Attach 2 copies of the onsite plans with a minimum of 5 soil log descriptions*

Type of Building:     New     Existing     SFR     Duplex    \_\_\_\_ # of Bedrooms     Commercial     Other \_\_\_\_\_

Pretreatment Type:    \_\_\_\_ SF    \_\_\_\_ ATU    \_\_\_\_ PSF    \_\_\_\_ Other     N/A

Dispersal Type:     Gravity     LPD     SSD     Mound     SLB     Other \_\_\_\_\_

Lot Size \_\_\_\_\_ Operating Capacity \_\_\_\_\_ gallons/day    Design Flow \_\_\_\_\_ gallons/day

Depth to Water table / Restrictive layer \_\_\_\_\_ Soil Type (1-6) \_\_\_\_\_ Application Rate \_\_\_\_\_ gallons /sq ft. /day

Absorption Area \_\_\_\_ sq ft.    Installation Depth \_\_\_\_\_ inches    Date Soils logged \_\_\_\_\_

Septic Tank Size \_\_\_\_\_ gallons    Pump Chamber Size \_\_\_\_\_ gallons    Required Soil volume \_\_\_\_\_ cu/yd.

Signature of Designer \_\_\_\_\_ Date \_\_\_\_\_ Address \_\_\_\_\_

Designer Name \_\_\_\_\_ License # \_\_\_\_\_ Phone \_\_\_\_\_

Owner or Authorized Agent \_\_\_\_\_ Signature \_\_\_\_\_  
Printed name

**FOR DEPARMENTAL USE ONLY**

Application Approved \_\_\_\_\_ Sanitarian \_\_\_\_\_ Date \_\_\_\_\_

Comments Attached \_\_\_\_\_

**Application Expires ON \_\_\_\_\_** Approval of this application does not constitute a permit to begin construction and installation of the system or any other improvements on the site. This approval shall not be considered an assurance that development permits for this site will be issued. An appeal process of a denial of this application will be furnished on request. Soils in the designated Drainfield and reserve should remain undisturbed. \_\_\_\_\_ Owner or authorized agents initials.

Permit Issued # \_\_\_\_\_ FEE(s) \$ \_\_\_\_\_

\_\_\_\_\_ Sanitarian \_\_\_\_\_ Date \_\_\_\_\_

Final Inspection \_\_\_\_\_ Final Inspection Approved \_\_\_\_\_