


  
**JOHNSON COUNTY**  
KANSAS  
**Health & Environment**

**2020 Application for Permit to Install a New Private Sewage Treatment System or Significant Alterations to an Existing Private Sewage Treatment System**

Major Repair:  \$420    New Construction:  \$475

Name of person/company paying for permit: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Email Address of person/company paying for permit: \_\_\_\_\_

Address of Property: \_\_\_\_\_  
Street City Zip

Section: \_\_\_\_\_ Township: \_\_\_\_\_ Range: \_\_\_\_\_ Lot Size: \_\_\_\_\_ SPA Number: \_\_\_\_\_

Owner Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Owner Address: \_\_\_\_\_  
Street City Zip

Email Address: \_\_\_\_\_ Type of Establishment: \_\_\_\_\_

Licensed Septic Installer Name: \_\_\_\_\_ Company Name: \_\_\_\_\_

Licensed Septic Installer Address: \_\_\_\_\_  
Street City Zip

Email Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

**If the system serves a home, the number of rooms/fixtures:**

Bedrooms: \_\_\_\_\_ Bathrooms: \_\_\_\_\_ Bathroom Sinks: \_\_\_\_\_ Kitchen/Utility Sinks: \_\_\_\_\_ Toilets: \_\_\_\_\_

Laundry: \_\_\_\_\_ Bathtubs: \_\_\_\_\_ Garbage Disposals: \_\_\_\_\_ Showers: \_\_\_\_\_ Sump Pumps: \_\_\_\_\_

**Proposed work on the on-site sewage treatment system (check one):**

Septic/holding/pump/aeration tank replacement:                       Absorption field replacement:

Absorption field repair/addition:                       Installing a new on-site sewage treatment system:

**The following must accompany the application:**

- A plot plan showing the foundation and the proposed location of the on-site sewage treatment system- Note: Must be drawn to the scale of 1" to 50' or larger and properly labeled to Johnson County standards;
- Blueprints of building, including site elevation (rear, side and front); electronic PDF submissions accepted
- If the proposed system is an alternative system, a design must be submitted by a Licensed Designer and approved by Johnson County Environmental Division prior to application.

This Permit shall be valid only for the stated conditions and shall be voided if installation is not as specified or final inspection is not made. This permit establishes minimum capacities but does not in any way guarantee trouble free disposal of sewage generated by this building.

Signature of Applicant/Agent: \_\_\_\_\_ Date: \_\_\_\_\_

**Office Use Only:** System GPS Location

Septic Tank	Pump Tank	Absorption Field
N	N	N
W	W	W