

TOWN OF WILLSBORO, NY

WASTEWATER TREATMENT SYSTEM APPLICATION

Property Tax Map #: _____ Permit #: _____

Property Owner: _____ Phone(w): (____) _____
Phone(h): (____) _____

Address: _____ Town: _____ State: ____ Zip: _____

Project site: _____ Town: ____ State: ____ Zip: _____

Licensed Design Professional: _____ Contractor: _____
Name: _____
Address: _____
Phone #s: _____

Worker's Compensation/Disability wages: ____yes ____no Policy #: _____

New System: _____ Repair: _____ Water supply: _____ Number of Bedrooms: _____

Depth to Season High Water Mark: _____ Percolation Test Results: _____ min./inch _____ min./inch

Site Map: (show dwelling location, potable water supply, septic tank, distribution box, absorption field or seepage pit, and give all dimensions and sizes.)

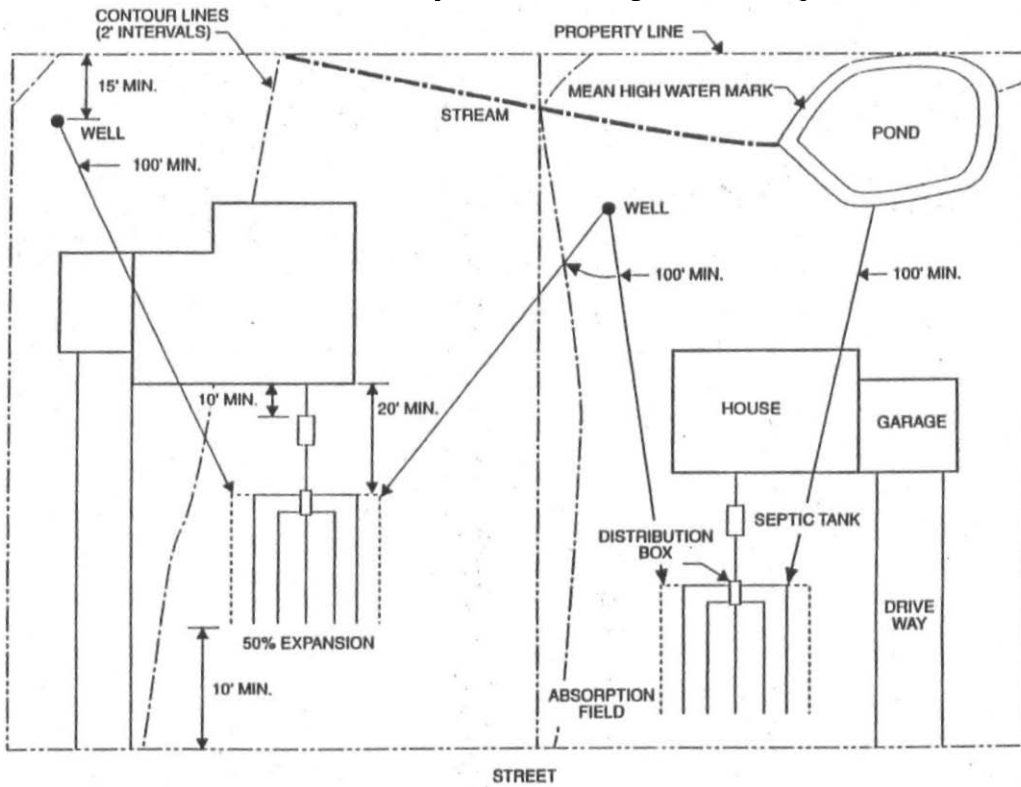
⇒ **Dig Safely New York 1-800-962-7962** ⇐

Signature of Applicant/
Authorized Agent _____ Date _____

Required fee: \$ _____ cash: _____ check #: _____ Make checks payable to: **Town of Willsboro**

Date Received: _____ Reviewed/Approved by: _____ Cert. of Completion Issued: _____

Wastewater Treatment System Field Separation Requirements



Required Length of Absorption Trench

Percolation Rate Min./Inch	Flow Rate (Gals/Day)														
	2 bedrooms			3 bedrooms			4 bedrooms			5 bedrooms			6 bedrooms		
	220	260	300	330	390	450	440	520	600	550	650	750	660	780	900
1 - 5	92	108	125	138	162	187	184	216	250	230	270	312	275	325	374
6 - 7	110	130	150	165	195	225	220	260	300	275	325	375	330	390	450
8 - 10	123	145	167	184	217	250	245	290	333	306	360	417	367	433	500
11 - 15	138	162	188	207	244	281	275	325	375	344	406	469	413	488	563
16 - 20	158	186	214	236	279	321	315	372	429	393	464	536	472	557	643
21 - 30	184	217	250	275	325	375	367	433	500	459	542	625	550	650	750
31 - 45	220	260	300	330	390	450	440	520	600	550	650	750	660	780	900
46 - 60	245	290	333	367	433	500	489	578	667	612	722	833	734	867	1000*
Dosing Not Required								Dosing or Alternate Design Required							

*Greater than 1,000 ft. of trench requires Alternate Dosing

Minimum Septic Tank Capacities

Number of Bedrooms	Minimum Tank Capacity (gal.)	Min. Liquid Surface Area (sq.ft.)
1, 2, 3	1,000	27
4	1,250	34
5	1,500	40
6	1,750	47