



STATE OF NEW YORK
SCHOHARIE COUNTY DEPARTMENT OF PUBLIC HEALTH

P.O. Box 667, 284 Main Street, Schoharie, New York, 12157
(518) 295-8382

**APPLICATION FOR PERMIT TO CONSTRUCT
SEWAGE TREATMENT SYSTEM FOR RESIDENTIAL USE**

This application is required for the construction of a sewage treatment system to serve a new or modified dwelling pursuant to Article 3 of the Sanitary Code of Schoharie County. **Fill in all blanks below:**

1. _____
Name of Owner _____ Town (Property Location) _____
2. Detailed location of site: _____

3. Tax Map # _____ 4. Number of Bedrooms _____ 5. Number of acres _____
6. If in a development: (a) Name _____ (b) Lot # _____
7. Remarks: _____

_____ Applications that are within the NYC Watershed Area, a non-refundable fee of \$125.00 for the permit must accompany this application. (Schoharie Department of Health approval is subject to review and approval through NYC Department of Environmental Protection.)

_____ Applications that are not within the NYC Watershed Area, a non-refundable fee of \$250.00 for the permit must accompany this application. (Fee includes plan review and permit processing.)

The check or money order must be made payable to the Schoharie County Department of Health. **Send application, appropriate fee, 2 sets of stamped and signed engineered plans and the required tax map to this department at the address given at the top of the application.** Obtain a tax map by calling the Real Property Tax Office at (518) 295-8349 (PO Box 667 284 Main Street, Schoharie, NY 12157).

I agree to construct and locate my water supply and sewage treatment system to meet the standards, rules and regulations of the Schoharie County Department of Health. The sewage treatment system will not be covered until a Certificate of Approval is issued by the Schoharie County Department of Health.

_____ Date _____ Signature of Owner/Buyer _____

_____ Telephone Number _____ Present Mailing Address _____

These regulations in no way waive the requirements of the applicant to seek approval from the New York State Department of Environmental Conservation or applicable unit of local government within Schoharie County for the sewage treatment systems requiring appropriate State or local review and approval.

Section 3 (f), Article 3, Sanitary Code of Schoharie County.

OFFICIAL USE ONLY	
Fee Received \$ _____	Receipt # _____
Date _____	By _____