



Septic Compliance Review

Renovation or Change of Use

- Completed Application
- Deed of Land or Tax Bill
- Septic Record or Evaluation
 - Septic Record Search Application: If you do not have septic system records, you may request one from South Nation Conservation.
 - *Please refer to the fee schedule & request form available at www.nation.on.ca.
 - If the record is not available, a Septic evaluation by a licensed individual is required.
 - *Evaluation must confirm: size of tank, total of runs, good working condition.
- Floor Plans of Existing and Proposed Structure(s)
 - Including basement, 2nd floor or others structure such as garage, shop, coach house, pool, etc.
 - If any office(s) or other area not considered a bedroom: Complete Appendix B - Office Acknowledgement
 - Hand drawn sketches are accepted.
- Site Plan
 - must include existing and new structures, all sewage system components, well, decks pool and horizontal distances.
- Applicable Fees - Refer to SNC's Fee Schedule
- Verify with your local municipality or Conservation Authority if your property is within a regulated area
- Drinking Water Source Protection Review (if applicable)

Missing information or incomplete documents may delay the approvals process.

Please send this application form to: septic@nation.on.ca or return to SNC Office.

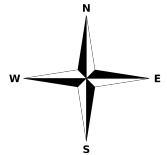


Proposed Site Plan & Floor Plans

If you are attaching formal plans, please check applicable box(es) below.

- Refer to attached floor plans (all levels, including basement)
- Refer to attached site plan

Part 11 (Distances) (check if applicable)



**CLEARLY indicate existing vs. modifications/additions*

Separation Distances (in metres)

D1 _____ D2 _____ D3 _____ D4 _____ D5 _____
 D6 _____ D7 _____ D8 _____ D9 _____

Minimum Clearance Distances – OBC requires that all applicable minimum clearance distances always be met (Refer to Appendix A). If you are proposing **external addition(s) ONLY with no connection to the septic system**, submit a site plan (not a floor plan) that includes accurate horizontal distances.



Fixture Count

Please complete the table below, including all applicable calculations.

	Fixture Units	Number of Existing	+	Number of Proposed	X	Unit Count	=	Total	
BATHROOM	Three-piece full bathroom								
	Full Bathroom group, any of three : <ul style="list-style-type: none"> • Toilet • Sink • Tub / Tub-shower combo, or • Shower stall 		+		X	6	=		
	Powder rooms or additional fixtures								
	If not already included in full bathroom group(s):	Toilet		+		X	4	=	
		Bathtub with or without overhead shower		+		X	1.5	=	
		Sink		+		X	1.5	=	
		Shower stall		+		X	1.5	=	
Bidet			+		X	1	=		
KITCHEN	Dishwasher		+		X	1	=		
	Sink		+		X	1.5	=		
OTHER	Domestic washing machine		+		X	1.5	=		
	Combination sink and laundry tray Single or double (installed on ½ trap)		+		X	1.5	=		
Total									

Note: If the existing structure has or is proposed to be removed, leave the 'number of existing' column blank.



Septic Compliance Review Clearance Disclaimer

The Septic Compliance Review will be based on the information provided by the proponent or agent. This information is not a building permit.

- 1) Documents and information stated above that are not completed or not submitted will delay the approval process;
- 2) The Septic Compliance Review will not be completed until payment is received;
- 3) Decisions on Clearances are based on the design criteria as set out in Part VIII of the Ontario Building Code;
- 4) The Septic Compliance Review does not take into consideration the age or the condition of a sewage system;
- 5) South Nation Conservation will not be held responsible for any sewage system failure that arise after the renovation has been carried out by the owner or agent;
- 6) If modifications are needed to the septic tank or leaching bed following this evaluation, a septic permit will be required. If this is the case, the owner/agent will need to complete the "[Private Sewage System Application](#)" or "[Tank Replacement Application](#)"; and,
- 7) The municipality will be provided with a copy of the submitted documentation.

I, _____, as the property owner, certify that all the information provided for the purpose of this septic compliance review is true and complete to the best of my knowledge.

Property Owner Signature

Date



Appendix A – Minimum Clearances

Ontario Building Code 8.2.1.6. – Clearances for a Class 4 Sewage System

Table 8.2.1.6.A. – Minimum Clearances for Treatment Units (Septic Tank)

Object	Minimum Clearance (m)
Structure	1.5
Well	15
Lake	15
Pond	15
Reservoir	15
River	15
Spring	15
Stream	15
Property Line	3
Column 1	2

Table 8.2.1.6.B. – Minimum Clearances for Distribution Piping (Leaching Bed)

Object	Minimum Clearance (m)
Structure	5
Well with a watertight casing to a depth of at least 6 m	15
Any other well	30
Lake	15
Pond	15
Reservoir	15
River	15
Spring not used as a source of <i>potable water</i>	15
Stream	15
Property Line	3
Column 1	2

Contact South Nation Conservation at 613-984-2948 or septic@nation.on.ca for minimum clearances tables for Class 2 (greywater pit), Class 3 (cesspool), or Class 5 (holding tank) sewage systems.



Appendix B – Office Acknowledgment

Ontario Building Code Standard Practice – SP.OBC.13.12. – Definition of a Bedroom

"Bedroom" and "Sleeping Area" are rooms or areas intended for sleeping.

Therefore, a home office, library, sewing room, den, studio, loft, games room, or any other conditioned room that is proposed, may be exempt from being considered a bedroom or sleeping area provided there is no closet.

I certify that the indicated _____ on the
_____ floor plan will not be converted into a bedroom in the future.

Also, I acknowledge that if the _____ is to be
converted into a bedroom, a Septic Compliance Review is required.

I certify that if the property should be sold, that I will notify the future owners of the above and that if they are to make any changes, they should consult with South Nation Conservation.

Property Owner Signature

Date