

**NOTICE OF PROPOSED INSTALLATION OF SEWAGE HOLDING TANK**

OWNER'S NAME \_\_\_\_\_ PHONE \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_

TAX MAP NO. \_\_\_\_\_ (TOWN/VILLAGE) \_\_\_\_\_

PROPERTY LOCATION \_\_\_\_\_

This is to notify the Cayuga County Health & Human Services Department that I propose to install a septic holding tank to serve the above noted property. The tank specifications are outlined below:

Tank specifications:

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I have completed a sketch showing the proposed holding tank location on the reverse side and included any appropriate remarks. I have included the following information on the attached sketch:

1. Nearest well on this property or adjacent property
2. Distance of holding tank to the nearest well
3. Number of bedrooms in the house

I will not begin any construction until this proposal is accepted by the Cayuga County Health Department. If site conditions do not allow installation as proposed, I will consult the Health Department before deviating from this accepted proposal.

I, the undersigned, understand that the attached plan, proposed by \_\_\_\_\_, is for the installation of a holding tank to serve an existing dwelling. Under the current County Sanitary Code, therefore, this sewage disposal system will be issued an interim permit.

I hereby authorize the Cayuga County Health Department to perform a site check at the property described above.

SIGNATURE OF  
APPLICANT \_\_\_\_\_ Date \_\_\_\_\_

**HEALTH DEPARTMENT USE ONLY**

The Environmental Health Division accepts the above proposal for the installation of a septic holding tank only. Any other construction or modification of the sewage disposal system will require additional approval.

ACCEPTED BY \_\_\_\_\_ Date \_\_\_\_\_