Manitoba

Application to Register a Disposal Field Onsite Wastewater Management System
***Onsite Wastewater Management Systems Regulation* (MR 83/2003)**
Flows less than 2,200 gallons per day - This form is in imperial units

Section 1: General Information

1(A) Property Owner and Property Information

First name	Last name		
Company/organization			
Legal description (section, township, range/lot, block, plan/river lot)	Municipality		
Civic address	City/town	Province MB	Postal code
Mailing address (if different than above)			
Home/business Phone	Cell Phone	Email	
Lot size (acres):	Lot dimensions (ft):		

Are there any restrictive covenants/easements registered on the land title that will impact the location of the onsite wastewater management system? ☐ Yes ☐ No If yes, describe below (e.g., hydro right of way) and attach a copy of the document(s):

This onsite wastewater management system will be installed by: Certified Installer ☐ Property owner ☐

1(B) Certified Installer Information

First name	Last name	
Company name (if applicable)	Installer certificate no.	Certificate expiry date
Mailing address		
Home/business Phone	Cell Phone	Email

1(C) Type of Registration

New construction ☐ Modification ☐ Replacement ☐ Expansion ☐ For modification, replacement or expansion, please briefly describe the proposed work:

This application is valid for a period of one year from the date that "Authorization to Proceed" is granted. If the information submitted is incomplete or incorrect, or if the supporting documentation and/or the site plan are of poor quality, the application may be delayed, returned or rejected.

Personal information is collected under the authority of The Environment Act and the Onsite Wastewater Management Systems Regulation (MR 83/2003) and will be used only for administration and enforcement purposes. Information collected is protected by the privacy provisions of the Freedom of Information and Protection of Privacy Act.

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Section 2: Building/Facility Information

2(A) Type of Building/Facility

Single family residence ☐ Multiple family residence ☐ Number of units: _____ Seasonal cottage ☐

Total number of bedrooms: _____ Will/does the building have a basement? Yes ☐ No ☐

Note: *Total number of bedrooms includes bedrooms that will be added in the future.*

Commercial/Industrial/Institutional ☐ Please describe (e.g., restaurant):_____

Number of customers/seats/beds/units:

Recreational ☐ Please describe (e.g., campground, lodge) : _____

No. of campsites/RV sites: Seasonal ☐ Year-round ☐

Work camp ☐ No. of employees: Duration of operation (months/years):

2(B) Source of Drinking Water Supply

Drilled well ☐ Is the well cased to a minimum depth of 20 feet? Yes ☐ No ☐

Dug well ☐ Municipal water supply ☐ Cistern ☐ Surface water body ☐

Section 3: Soil and Site Conditions

Site Evaluation Information ***** Please attach the lab report for soil particle size analysis.***

Number of soil test pits or auger boreholes: | Depth of test hole(s) (ft):

Soil texture classification (e.g., sandy loam): | Slope in disposal field area (%):

Depth from ground surface to: Restrictive layer (e.g., > 60% clay or cemented layer) (ft): _____

Bedrock (ft) Normal high water table (ft):

Has fill material been placed in the location of the proposed disposal field?: Yes ☐ No ☐

If yes, what is the depth of fill material (ft): _____ Type of fill material (e.g., sand, clay): _____

Note: *Fill material in this section refers to soil that has been placed on the property to improve drainage and/or to raise ground elevation for flood protection.*

Section 4: Onsite Wastewater Management System Specifications

4(A) Type of Onsite Wastewater Management System

Septic tank/disposal field ☐ | Secondary treatment system ☐ | Greywater management system ☐

4(B) Estimated Daily Sewage Flow

Estimated daily sewage flow (gallons per day): _____ ***** See tables in Supplementary Information.***

***** If flow monitoring data is being used to determine the estimated daily sewage flow, please attach flow monitoring data.***

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4(C) Septic/Pump Tank Details (See Sections 1(1), 1(2) and 1(3) in Schedule A in MR 83/2003)

Septic tank ☐ Tank construction material: Concrete ☐ Fiberglass ☐ Polyethylene ☐

1st compartment (gallons): _____ 2nd compartment (gallons): _____

Is the tank CSA B66 certified? Yes ☐ No ☐ Make and model no.:

GPS location of proposed septic tank (if available) Longitude: Latitude:

Greywater management system (if applicable) ☐ In addition to the septic tank information provided for managing greywater, please complete the holding tank information below for managing toilet waste:

Holding tank ☐ Volume (gallons): _____ Concrete ☐ Fiberglass ☐ Polyethylene ☐

Is the tank CSA B66 certified? Yes ☐ No ☐ Make and model no.:

Are low-flow water closets (less than one gallon per flush) to be used to service the building? Yes ☐ No ☐

**** The building perimeter drain (weeping tile) and sump pump are <u>not</u> to be connected to any component of the Onsite Wastewater Management System.***

4(D) Disposal Field System Details (See Schedule A in MR 83/2003 and Supplementary Information)

Soil application rate (from soil texture classification): (gallons/ft^2/day)

GPS location of proposed disposal field (if available) Longitude: Latitude:

Please complete Section (1), (2) or (3) below:

<u>(1) Trenches</u>: Traditional subsurface trenches ☐ Modified trenches ☐ (e.g., shallow placement, sand-lined trenches)

Graded stone trenches ☐ Trench depth (ft): _____ Trench width (ft): _____ Number of trenches:_____

Trench spacing (measured from trench sidewalls) (ft): _____ Total length of distribution pipe (ft): _____

Pipe diameter (in): Stone depth below distribution pipes (in): Stone depth above distribution pipes (in):

Effluent chamber trenches ☐ Make and model no. _____

Chamber width (in): _____ Trench depth (ft): _____ Total length of effluent chambers (ft): _____

Number of trenches: Trench spacing (measured from trench sidewalls) (ft):

Will the trenches be lined with sand fill? Yes ☐ No ☐ Type of sand fill: ASTM C33 sand ☐ loamy sand ☐

Depth of sand fill below graded stone/chambers (in): **** Please attach ASTM C33 Sand Analysis Report.***

<u>(2) Total Area Fields (TAF)</u>	<u>Field area (ft^2)</u>	<u>Volume of stone (yd^3)</u>
Subsurface TAF ☐	_____	_____
Modified TAF ☐	_____	_____
Above ground TAF ☐	_____	_____

Bottom dimensions of TAF (length and width or diameter) (ft):

Total length of distribution pipe (ft):	Number of distribution pipes:	Pipe diameter (in):
Depth of stone below distribution pipes (in):	Depth of stone above distribution pipes (in):	

For modified and above ground TAF: **** Please attach ASTM C33 Sand Analysis Report.***

Depth of ASTM C33 sand below graded stone (in): Volume of ASTM C33 sand (yd^3):

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(3) Sand Treatment Mounds

Sand mound infiltration system: (select graded stone or effluent chambers)

Graded stone ☐	Effluent chambers ☐ Chamber width (in):_____
Stone depth of below distribution pipes (in): _____	Total length of effluent chambers (ft): _____
Stone depth above distribution pipes (in):	Make and model no. :

Sand fill specifications: Depth of ASTM C33 sand below graded stone/chambers (in): _____

Depth of loamy sand fill (if applicable): _____ (in) Total depth of sand layer (ASTM C33 + loamy sand): _____(in)

***** Please attach the Sand Mound Design Worksheet, ASTM C33 Sand Analysis Report and complete the pressure distribution system information in Section 4(E).***

4(E) Disposal Field Distribution System Details

Wastewater effluent will be delivered to the disposal field by: Gravity ☐ Pump ☐

Wastewater effluent will be distributed by: Distribution box ☐ Header pipe ☐ or Pressure distribution system ☐

For Pressure Distribution Systems, please complete the information below:

Number of laterals: _____ Length of each lateral (ft): _____ Lateral spacing (ft): _____

Lateral diameter (in): _____ Discharge hole diameter (in): _____ Discharge hole spacing (ft): _____

Residual pressure head (squirt height) (ft): _____ Type of manifold: Central ☐ End ☐

Manifold diameter (in):

4(F) Vertical Separation Distance (To be completed for all disposal field systems)

The vertical distance measured from the bottom of the graded stone/chambers to a restrictive layer, bedrock, or normal high water table will be (ft):

4(G) Secondary Treatment System Details

System type: Aerobic treatment unit ☐ Biofiltration system ☐ Combined treatment/dispersal system ☐

Make and model no.: _____ Treatment capacity (gal/day): _____

***** Please attach the Homeowner Service Agreement and design worksheets (if applicable).***

Section 5: Setback Distances

Horizontal Set-Back Distances (in feet) (See Sections 1(1)(e) and 2(2)(c) in Schedule A in MR 83/2003)

Setback feature	**Distance from septic/holding tank or secondary treatment unit to:**	**Distance from disposal field to:**
Nearest property boundary		
Residence/building with ☐ or without ☐ basement		
Nearest well ☐ or cistern ☐		
Watercourse, excluding a ditch		
Cut/embankment		
Swimming pool		
Water service pipe	N/A	

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Section 6: Registration Fees and Supporting Documentation

6(A) Registration Fees	
Septic tank/disposal field (B-20-2) $100.00 + $5.00 = $105.00 ☐	*** Fees include registration fee + 5% GST*
Secondary treatment system (B-20-5) $250.00 + $12.50 = $262.50 ☐	*GST registration no. R107863847.*
Holding tank & greywater disposal field (B-20-6) $100 + $5 = $105 ☐	*Make cheque payable to "Minister of Finance"*

6(B) Supporting Documentation – Please attach all applicable documentation
Property information: Covenant/easement ☐ **Note:** Submission of a land title search and/or legal survey plan may be requested.
Disposal Field Information: Soil Particle Size Lab Analysis Report ☐ Sand Mound Design Worksheet ☐ ASTM C33 Sand Analysis Report ☐
Secondary Treatment System Information: Treatment/Disposal System Design worksheets ☐ Homeowner service contract agreement ☐
Estimated Daily Sewage Flow Information: Water use and/or sewage flow monitoring data ☐

Section 7: Applicant Declaration

Property owner's signature (required)	Date:
Authorized representative: If you are a Certified Installer or other authorized person acting on behalf of the property owner, you must sign below to certify that you are acting with the property owner's full consent: Date: Signature: _____ Full name (please print clearly):	
I hereby certify that the information contained in this application is correct and that the onsite wastewater management system will be installed in accordance with the Onsite Wastewater Management Systems Regulation (MR 83/2003), Supplementary Information (2010), and the attached documents. I acknowledge that the installation cannot proceed until I have received "Authorization to Proceed" from an environment officer.	

Environment Officer Authorization			
Registration reviewed and authorized to proceed by:	Date:	EO number:	
System inspected by:	Date:	Authorized to cover by:	Date:

For Internal Office Use Only			
Property is located in Nutrient Management Zone N4: ☐ Yes ☐ No		**PAID:**	
Property is located in the Red River Designated Area: ☐ Yes ☐ No		**Date:**	
Property is located in: Provincial park ☐ Crown land ☐ sensitive area ☐		**Amount:**	
Variance requested: Yes ☐ No ☐		**Rec'd by:**	
Date variance approved:		**MRO #:**	
Is the property serviceable by a municipal wastewater collection system? Yes ☐ No ☐			
GPS info	Septic tank/secondary treatment system: Lat: Long:	Disposal field: Lat: Long:	

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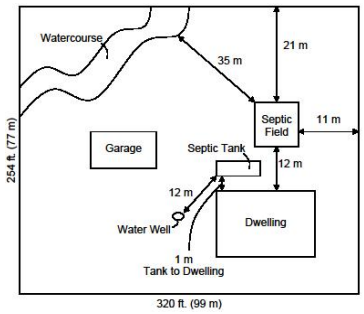
Site Plan Diagram



The site plan must include the following information:

1. Property dimensions and boundaries, ground slope (%), driveway location

2. Location and layout of the onsite wastewater management system (e.g., septic/holding tank, secondary treatment unit, disposal field) and setback distances to the following:
   - Nearest property boundary • Nearest well or cistern • Watercourses
   - Residence/buildings • Water service pipes • Cuts/embankments • Swimming pool

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