INDIVIDUAL WAIVER

		For Individu	al Household Sewage	Treatment System		
SENERAL INF	ORMATIO	N (Applicant Comple	ete)			
Name of App	licant					
	Last		First		MI	
Address						
	No.	Street	City/Town	State	Zip	
ite Location						
	No.	Street	City/Town	State	Zip	
				Applicant Sign		
	(App	olicant – Do not writ	e below this line)			
	Soil u Othe	ınsuitable r (explain)	Irock or impermeable			
2.	Proposed (design or conditions	of waiver:			
3.	The proposed design may have the following limitations (check appropriate lines) Increased risk of well or spring contamination					
	Increased risk of surface water contamination					
	Increased risk of inadequately treated sewage on the ground surface Expected design life of the system will diminished					
	Operation of onsite wastewater treatment is subject to mechanical problems					
	Othe	r (explain)				
	Additic	onal Information Att	ached			
		All mornation All				

From Requirements of Keuka Watershed Improvement Cooperative

Construction pursuant to this waiver request should not pose any foreseeable health or environmental problems. In accordance with the Keuka Watershed Improvement Cooperative, a waiver is hereby granted. This waiver may be revoked by the issuing official for a change in conditions for which this waiver was granted.

Contract Watershed Manager

Date