MUNICIPALITY OF ANCHORAGE

Development Services Department On-Site Water & Wastewater Section Phone: 907-343-7904

ON-SITE SEPTIC/WELL PERMIT APPLICATION

| Parcel I.D. | | | |
|---|-----------------|------------------|-----------|
| Property owner(s) | | Day phone | |
| Mailing address | | | |
| Site address | | | |
| Legal description | | | |
| Number of Bedrooms | _ | | |
| Engineering Firm | | | |
| Building Permit Number | | Not Applicable | |
| APPLICATION IS FOR: (⊠ all that apply) | | APPLICATION IS | AN: |
| Disposal Field | | Initial | |
| Septic Tank | | Upgrade | |
| Holding Tank | | Renewal | |
| Privy | | | |
| Well | | | |
| Water Storage | : 🗆 | | |
| THIS APPLICATION IN | ICLUDES A WAIVE | R REQUEST FOR: | |
| | | | Distance: |
| | | | |
| Permit/Rush Fees: | | Waiver Fees: | |
| Date of Payment: | | Date of Payment: | |
| Permit No. | | Waiver No. | |