

**Your Name and/or Company**  
123 Greenwood Drive, Your City, B.C., V6L 2D2  
Cel. 250 123 4567 Office 250 234 5678  
email: emailaddress@provider.ca

**Property Owner's Declaration  
Regarding Sewerage System**

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***Property Information***

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Legal description \_\_\_\_\_

Common Address \_\_\_\_\_

STREET NUMBER/STREET NAME

Lot Size: \_\_\_\_\_ hectares/acres

CIRCLE ONE

CITY / PROVINCE / POSTAL CODE

Property Tax Information:

P.I.D. # \_\_\_\_\_

PROPERTY IDENTIFIER NUMBER

Folio. # \_\_\_\_\_

TAX ASSESSMENT ROLL NUMBER

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***Owner Information***

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Legal owner's name \_\_\_\_\_

Owner's mailing address \_\_\_\_\_

STREET NUMBER/STREET NAME

CITY / PROVINCE / POSTAL CODE

Owner's Phone

Residence: (\_\_\_\_) \_\_\_\_\_ Cell: (\_\_\_\_) \_\_\_\_\_

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***Building Information***

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**Please indicate the intended use of structures:**

Residential only - Yes  No .

Commercial use in whole or part - Yes  No .

Please describe any commercial uses: \_\_\_\_\_

**Please indicate size and configuration of structures:**

	Anticipated occupancy (number of persons)	Number of bedrooms:	Floor Area (including basement, but excluding decks, garage and similar non-living areas)
Primary residence:			
Secondary residence (suite, detached units, trailers, cabins, etc.)			

Are there additional structures, existing or planned, with plumbing fixtures?  Yes <input type="checkbox"/> No <input type="checkbox"/>	If yes, please describe size and intended use:
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## **Planned Uses**

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1. Will the basement be finished or unfinished?  
 Finished                       Unfinished                       Not applicable (no basement)

If the basement will be unfinished, what is its intended use? \_\_\_\_\_  
\_\_\_\_\_

2. Do you plan on having a self sufficient living suite in addition to the main residence, either immediately or in future?                       Yes     No

If yes, please provide details: \_\_\_\_\_  
\_\_\_\_\_

3. Do you plan on having a Bed and Breakfast?                       Yes     No

If yes, please provide details: \_\_\_\_\_  
\_\_\_\_\_

4. Do you plan on having an in-sink garbage disposal unit?                       Yes     No

5. Do you plan on having a water softener or other water treatment system?     Yes     No

If yes please describe: \_\_\_\_\_  
\_\_\_\_\_

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## **Other Information**

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6. Do or will you have a well?                       Yes     No

If yes, describe its general location on the lot? : \_\_\_\_\_  
\_\_\_\_\_

7. If no, the source of domestic drinking water is: \_\_\_\_\_  
\_\_\_\_\_

8. Are there any neighbouring wells within 30 m of your property boundaries?     Yes     No

If yes, describe their locations: \_\_\_\_\_  
\_\_\_\_\_

9. Are there any covenants or easements on the property that could affect the sewerage system?                       Yes     No

If yes what are the general description and location? \_\_\_\_\_  
\_\_\_\_\_

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## **Declaration Statement**

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I/We, the undersigned declare that I/we are legal owners of the above described property and the information given above is true and accurate for the purpose of planning, designing, constructing and maintaining a Sewerage System for said property, and that any changes, alterations or amendment to this above information (before construction of the sewerage system) will be provided to \_\_\_\_\_, the "authorized person," as defined in the B.C. *Health Act, Sewerage System Regulation 324/2004*, in writing prior to any installation of a sewerage system.

Name of Owner(s)

Date of Signed Declaration: \_\_\_\_\_

\_\_\_\_\_  
PRINT NAME

\_\_\_\_\_  
PRINT NAME

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
SIGNATURE