

**Georgia Department of Human Resources
Application for Septage Land Disposal Site Permit
Chapter 290-5-25**

County: _____

Land Disposal Site Address: _____

Permit Applicants Name: _____

Address: _____

Phone #: _____

Land Owners Name: _____

Address: _____

Phone #: _____

The following information must accompany the application:

Written permission from the local governing authority (as applicable): _____

Notarized written permission from Property Owner: _____

Recorded plat of the property: _____ Application area boundaries identified on plat: _____

Soil report and map: _____ Soil fertility test: _____ Soil pH test: _____

Trace metals (pollution) soil test: Levels meet standards _____ Levels do not meet standards _____

Vector attraction reduction method: _____

Method of securing site: Signs posted _____ Access Control _____

Septage Holding Facilities: _____

Septage Removal and Disposal Permit Issued: _____

Septage Application Record submitted as applicable: _____

I hereby apply for a permit for the land application of domestic septage at the above listed location and agree that the operation will conform to the requirements of the Department of Human Resources Rules and Regulations for the Land Disposal of Domestic Septage, Chapter 290-5-25. I understand that receipt of a permit for this land disposal site is for the exclusive use of the applicant company alone and is not transferable to others.

Applicants Signature: _____ Date: _____

Date of Evaluation: _____ By: _____ Approved: _____ Disapproved: _____

Annual Application Rate: _____ gallons/acre/year

Fee Amount Paid: _____ Received By: _____ Date: _____