

RILEY COUNTY PLANNING & DEVELOPMENT

110 Courthouse Plaza
MANHATTAN, KS 66502
(785) 537-6332, EXT. 7505

Log # _____
Date rec'd _____
Receipt # _____
Pd: check # _____
cash..... _____
\$75.00 fee

**APPLICATION:
REPAIR WASTEWATER SYSTEM**

I, _____, apply to repair or modify a private wastewater disposal system to serve a _____ bedroom family dwelling which is or will be located on a tract described as follows:

Repair address: _____
(Street) (City) (Zip Code)

Legal Description (copy may be attached): _____ Lot size: _____

Directions to property: _____

Mailing address: _____
(Street) (City/State) (Zip Code)

Home Phone _____ Work Phone _____ Cell Phone _____

Email address: _____

Name of licensed installer: _____

Cause of failure: _____

I hereby certify the information on this application is true and correct to the best of my knowledge and belief.

Date: _____ Signature of applicant: _____

Preliminary proposal approved this _____ day of _____, _____ with conditions and/or remarks as follows:

by: _____

PRIVATE WASTEWATER DISPOSAL SYSTEM USE PERMIT

Final construction is approved and permit is hereby issued this _____ day of _____, _____,

by: _____