

Sewerage System Letter of Certification

Tax A	Assessment Roll #:	Date:	
То:	Interior Health	(Day/Month/Year)	
Re: Se	ewerage system at:	Street Address or General Location	
		Street Address of General Location	
		Legal Description	_
Planne	er:	Installer:	
Owne	er:		
	onstruction of the proposed sew leted on(Day/Montl	verage system on the above described property was	
	•	person as defined in the Sewerage System	
2. 3. 4. 5. A plar	 a maintenance plan for the standard practice; and, a copy of this letter of cert the sewerage system has been the sewerage system has been plans and specifications filed with the estimated daily domestic seless than 22,700 litres; and, if operated and maintained as system will not cause or contribute. 	tem plans and specifications as they were built; sewerage system that is consistent with ification; constructed in accordance with standard practice; constructed substantially in accordance with the ith the Health Authority; ewage flow through the sewerage system will be set out in the maintenance plan, the sewerage ibute to a health hazard.	
AUTHOR	IZED PERSON'S SEAL	DATE LETTER OF CERTIFICATION ACCEPTED	

White: Health Protection Canary: Owner Pink: Building Authority Blue: Authorized Person

820083 Feb 06