

Interior Health Application for Water Supply System Construction Permit

Public Health Engineering Thompson Cariboo Shuswap 519 Columbia Street Kamioops BC V2C 2T8 Telephone: (250) 851-7340 Facsimile: (250) 851-7341

Date:			
Water Supply System Name:			
Water Supplier (owner):			
Address:			
	Postal Code:		
			•
PROPOSED WORKS:(FOR WATER MAIN PROVIDE LENGTH, SIZE, TYPE; EG. 900M. OF 150MM PVC)			
	<u></u>		- In the state of

. Will all water mains have 3 meters clear separation from storm and sanitary sewers? (if NO attach note)			
Will water mains be disinfected in accordance with cu AWWA standards?	urrent		
Are all works located on public right-of-way or registered easements?			
Are all drawings signed and sealed by a Professional Engineer?			
Number of new lots/connections to be serviced?			
What is the approximate value of the waterworks project?			
Submitted by:	Signature:		
Address:		Postal Code:	
email:			
Telephone: Fax: _			_