



Request to Waive Waterworks Construction Permit for V Hauled Water Source or Non-potable Use

Facility name	
Nearest community	
Site sketch attached	Yes or No
Number of buildings (connections)	
Maximum population served	persons
Water uses	Specify: <i>potable</i> (human consumption) or <i>non-potable</i> (sanitation only)
Supplied by water hauler with valid operating permit from Northern Health	Yes or No
Supplied by on-site water source	Yes or No
On-site water treatment	Yes or No
If yes, describe treatment:	Specify: softener, UV, RO, cartridge filter, activated carbon filter, none,
Number of water storage tanks (cisterns)	
Storage tank manufacturer	
Storage tank model number	
Storage tank capacity	Specify: <i>USG</i> (US gallons) or <i>L</i> (litres)
Storage tank material	Specify: <i>poly</i> (polyethylene), <i>SS</i> (stainless
	steel), concrete, fibreglass, etc.
New, unused tank	Yes or No
If No, describe past use:	
Pump motor (hp)	Specify: ½hp, ¾hp, 1hp,
Pressure switch settings (psi)	Specify: 20/40, 30/50, 40/60,
Number of pressure tanks	
Max capacity of pressure tanks	Specify: <i>USG</i> (US gallons) or <i>L</i> (litres)
Plumbing (pipe) material	Specify: ABS, PVC, PEX, HDPE, copper,
Estimated weekly water use	Specify: <i>USG</i> (US gallons) or <i>L</i> (litres)
Water use log (diary)	Yes or No
Water meter	Yes or No
Free chlorine concentration log (diary)	Yes or No
Environmental Health Officer	Name of Northern Health EHO
EHO agrees with waiver?	Yes or No
Applicant name	
Applicant phone(s)	
Applicant e-mail(s)	
□ Waiver approved□ Waiver denied	
Povinu comments	
Review comments	

Form: Dec 2016