INDIVIDUAL WAIVER

From Requirements of Keuka Watershed Improvement Cooperative
For Individual Household Sewage Disposal System

GENERAL INFORMATION (Applicant Complete)

Name of Applicant_____
Last First MI

Address_____
No. Street City/Town State Zip

Site Location_____
No. Street City/Town State Zip

_____
Applicant Signature

_____(Applicant – Do not write below this line)_____

1. Reason site does not meet part 75 of NYS Sanitary Code: (check appropriate lines)
   - ____ Separation distance cannot be achieved
   - ____ Excessive slope
   - ____ High groundwater
   - ____ Inadequate depth to bedrock or impermeable layer
   - ____ Soil unsuitable
   - ____ Other ( explain)_____

2. Proposed design or conditions of waiver:
   _____
   _____

3. The proposed design may have the following limitations ( check appropriate lines)
   - ____ Increased risk of well or spring contamination
   - ____ Increased risk of surface water contamination
   - ____ Increased risk of inadequately treated sewage on the ground surface
   - ____ Expected design life of the system will diminished
   - ____ Operation of onsite wastewater treatment is subject to mechanical problems
   - ____ Other (explain)_____

___Additional Information Attached_____

Construction pursuant to this waiver request should not pose any foreseeable health or environmental problems. In accordance with the Keuka Watershed Improvement Cooperative, a waiver is hereby granted. This waiver may be revoked by the issuing official for a change in conditions for which this waiver was granted.

_____
Paul R. Bauter
Watershed Manager