



Health and Senior Services Building
2465 Bonadent Drive, Suite 3
Waterloo, NY 13165

Division of Environmental
Health Services

Phone: 315-539-1945
Fax: 315-539-4745

www.senecacountyhealthdepartment.com

**APPLICATION TO INSTALL A NEW SEPTIC SYSTEM
WITHIN AN APPROVED SUBDIVISION**

Application is hereby made to the Seneca County Health Department for review of plans for a septic system to serve the property described below:

Applicant Name _____ Telephone _____

Mailing Address _____

Email Address _____

Property location of proposed residence:

Town _____ Tax Map # _____

Proposed # of Bedrooms _____ Garbage Disposal Proposed (Yes _____ No _____)

Applicant: Before you sign this application, read the following paragraph:

I understand that the septic system and private well will be installed as shown on the approved subdivision plan. Acceptance by the Seneca County Health Department does not guarantee that the facilities will function properly. The Seneca County Health Department assumes no liability should the septic system as designed in the approved subdivision plan fail to function properly.

Signature of Applicant _____ Date _____