

**TOWN OF FRANKFORT**  
**APPLICATION FOR SEPTIC SYSTEM PERMIT**  
**CODES DEPARTMENT**  
**894-0922**

DATE \_\_\_\_\_ 20 \_\_\_\_\_

PERMIT NO. \_\_\_\_\_  
C/O NO. \_\_\_\_\_

Application is hereby made to the Codes Department for the issuance of a Building and Zoning Permit pursuant to the N.Y.S. Uniform Fire Prevention & Building Code for the construction of buildings, additions or alterations, as herein described. The applicant or owner agrees to comply with all applicable laws, ordinances, regulations, and also will allow all inspectors to enter the premises for the required inspections.

Applicant's Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Property Owner's Name: \_\_\_\_\_

Property Address: \_\_\_\_\_

\_\_\_\_\_ Zip \_\_\_\_\_

Tax Map Number: \_\_\_\_\_

Proposed Location of Construction: \_\_\_\_\_

\_\_\_\_\_

Contractor's Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Name of Compensation or General Liability

Carrier & Policy # \_\_\_\_\_

\_\_\_\_\_

Zoning District \_\_\_\_\_

Lot Size \_\_\_\_\_ Area \_\_\_\_\_

Existing Building Size \_\_\_\_\_

Bldg. Height \_\_\_\_\_ Ft. \_\_\_\_\_ Stories

No. of Bedrooms \_\_\_\_\_ Gar. Disposal \_\_\_\_\_

Size of Septic Tank \_\_\_\_\_ Perk Rate \_\_\_\_\_

Trench Length \_\_\_\_\_ No. Trenches \_\_\_\_\_

NYS Approved Plans Date \_\_\_\_\_

Estimated Cost \$ \_\_\_\_\_

**SEPTIC SET BACKS:**

Front Yard Depth \_\_\_\_\_ Feet

Right Side Yard Width \_\_\_\_\_ Feet

Left Side Yard Width \_\_\_\_\_ Feet

Rear Yard Depth \_\_\_\_\_ Feet

Septic System Fee \$ \_\_\_\_\_

TOTAL FEE \$ \_\_\_\_\_

**NOTE:** Inspections by Codes Department are required at the following schedule. (You must call 24hr before Inspections is need.)

1. Septic Tank	4. Drain Field	1/16 in. Per Ft. Max. Pitch	6" of Stone Above Pipe	Earth Cover Exceed 12"
2. Distribution Box		Laterals Capped	Trench 2' Wide & 6' Apart	
3. Solid Pipe		8" to 10" of Stone Under Pipe	Untreated Paper or 4" Straw	

**NOTE:** THIS BUILDING PERMIT IF FOR RESIDENTIAL OR COMMERCIAL WORK EXPIRES ONE (1) YEAR FROM DATE ISSUED.

\_\_\_\_\_  
Signature of Owner , Applicant or Agent

\_\_\_\_\_  
Printed or Typed Copy of Signature

The application of \_\_\_\_\_ dated \_\_\_\_\_ 20\_\_\_\_  
is hereby approved (disapproved) and permission granted (refused) for the construction, reconstruction  
or alteration of a building and / or accessory structure set forth above.

Reason for refusal of permit \_\_\_\_\_

Dated \_\_\_\_\_ 20\_\_\_\_

\_\_\_\_\_  
Codes Department Officer