

Fairfield Town

Utah County, Utah

Excavation & Fill Permit Application

Property Owner: _____

Address: _____

Phone #: _____ Email: _____

Excavator's Name: _____

Contractors State Lic # _____

Address: _____ City: _____ State: _____ Zip: _____

Phone#: _____ Cell: _____

Email: _____

Proposed Project Name: _____ Project Acreage: _____

Address of Proposed Project: _____

Amount of Excavation or fill (In Cubic Yards) _____

Estimated Improvement Cost: _____

Estimated Start Date: _____ Estimated Completion Date: _____

Description of the Project: _____

Excavation for:

- ☐ Roads
- ☐ Telecommunications
- ☐ Building - Residential, Commercial
- ☐ Disinterment of Grave

- ☐ Utility Lines
- ☐ Ditches
- ☐ Septic

Type of Septic Work:

- ☐ New septic system
- ☐ Septic system replacement
- ☐ Septic system repair
- ☐ Septic tank abandonment

Utah County Health Department Permit to Install #: _____

(Permit or approval must be issued before excavation begins)

Date Issued: _____

Septic Installer Name: _____

Installer License #: _____

- ☐ I understand that excavation for a septic system may not begin until approval is issued by the Utah County Health Department.
- ☐ I acknowledge that a designated septic reserve area must be protected from disturbance. This is often missed and is a major compliance issue.
- ☐ I understand that septic components may not be covered or backfilled until inspected and approved by the Utah County Health Department..

The following documents may be required by the Town:

- | | |
|--|---|
| <input type="checkbox"/> Ownership affidavit. | <input type="checkbox"/> Utah County Health Department–approved septic design |
| <input type="checkbox"/> Site Plan. | |
| <input type="checkbox"/> Engineering Plan. 2 copies. | |
| <input type="checkbox"/> SWPPP. 2 copies of stormwater pollution prevention plans. | <input type="checkbox"/> Septic system layout showing tank, drain field, and reserve area |
| <input type="checkbox"/> Improvement Bond. | |
| <input type="checkbox"/> As-builds: As-builds must be provided to the Town prior to the release of the improvement Bond. | <input type="checkbox"/> Setbacks from wells, structures, property lines, and waterways |
| <input type="checkbox"/> Soil evaluation or percolation test (as required by Utah County Health Department) | |

I certify under penalty of perjury that this application and all information submitted as a part of this application are true, complete, and accurate to the best of my knowledge. I also certify that I am the owner of the subject property & that the authorized agent noted in this application (if there is one), has my consent to represent me with respect to this application. I have read and agree to comply with the above standards and pay all fees associated with this permit. I understand that other specific requirements not on this list may be requested by the Town. See Roads.

Owners Signature: _____ Date: _____

For Office Use Only

Date: ____/____/____

- ☐ TI permit # _____
- ☐ Application fees paid
- ☐ Zoning: _____
- ☐ Road Dept
- ☐ Planning Commission: Approved: _____ Denied: _____ Date: _____
- Comments: _____
- _____
- _____
- ☐ Town Council: Approved: _____ Denied: _____ Date: _____
- Comments: _____
- _____

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- ☐ **Total Fees:** _____ **Paid:** _____
 - ☐ **Check #:** _____
 - ☐ **License #:** _____

Title

Signature

Date