Schedule 2: Sewage System Installer Information

A. Project Information				
Building number, street name			Unit number	Lot/con.
Municipality	Postal code	Plan number/ other descr	<u>l</u> iption	
D. Oans and and in tall an				
B. Sewage system installer				
Is the installer of the sewage system engaged in the business of constructing on-site, installing, repairing, servicing, cleaning or emptying sewage systems, in accordance with Building Code Article 3.3.1.1, Division C?				
Yes (Continue to Section C) No (Continue to Section E)			Installer unknown at time of application (Continue to Section E)	
C. Registered installer information (where answer to B is "Yes")				
Name			BCIN	
Street address			Unit number	Lot/con.
Municipality	Postal code	Province	E-mail	
Telephone number	Fax		Cell number	
D. Qualified supervisor information (where answer to section B is "Yes")				
Name of qualified supervisor(s) Building Code Identification			n Number (BCIN)	
E. Declaration of Applicant:				
Ι				declare that:
(print name)				
I am the applicant for the permit to construct the sewage system. If the installer is unknown at time of application, I shall submit a new Schedule 2 prior to construction when the installer is known;				
<u>OR</u>				
I am the holder of the permit to construct the sewage system, and am submitting a new Schedule 2, now that the installer is known.				
I certify that:				
The information contained in this schedule is true to the best of my knowledge.				
2. If the owner is a corporation or partnership, I have the authority to bind the corporation or partnership.				
Date Signature of applicant				

NOTE: Personal information contained on this form is collected pursuant to the Ontario Building Code Act and the Haldimand County On-Site Sewage Systems By-law and will be used for the purpose of reviewing this evaluation. Questions about this collection may be directed to the Chief Building Official at Haldimand County at 905-318-5932.