

The following information must be completed in full. Searches and copies to be processed after payment is received. Please allow a minimum of 10 business days to process request.

Property Owner: _____

Prior Owners:
(Chain of title to 1976) _____

Approximate Year System was Installed: _____

Owner or Installer at Time of Installation: _____

Property Description: _____

County: _____ Township: _____

Lot Number: _____ Concession: _____ Plan No. _____ Sublot: _____

Municipal Address: _____ Lot Size: _____

Search Requested By:

Name: _____ Agency: _____

Address: _____

Home Number: _____ Business: _____

Authorization of current owner of the property: _____

Owner's Signature: _____ **Date:** _____

FEES: Copies of septic permits \$ 35.00
Lawyer Search permits and letters \$125.00

Cheques payable to: **Peterborough Public Health**
185 King St., Peterborough, ON K9J 2R8
Email: safesewage@peterboroughpublichealth.ca
Phone: 705-743-1000, ext. 228, Fax: 705-743-1203

OFFICE USE ONLY
FEE RECEIPT NUMBER
DATE FEE RECEIVED

PICK UP MAIL E-MAIL