



Building Department  
 100 Wellington Square  
 Brantford, Ontario, N3T 2M2  
 Phone: (519) 759-4150, Fax: (519) 752-1874  
[www.brantford.ca](http://www.brantford.ca)  
[building@brantford.ca](mailto:building@brantford.ca)

## Sewage System Design Summary – Single Detached Dwellings

*Note: This form must be filled out entirely and submitted with a completed Ontario Building Code Application for a Permit to Construct or Demolish including Schedule 1 and Schedule 2. Two copies of a site plan, sewage system plan and a site evaluation report must also be provided.*

Project Address:			
Owner:			
Sewage System Designer:	B.C.I.N.		
Purpose of Application: (Circle One)	Repair Existing	New System	
Water Supply: (Circle One)	Municipal Water	Dug Well	Drilled Well

Sewage System Design Flows (OBC Table 8.2.1.3.A)				Volume, litres	
Number of Bedrooms between 1 and 5					A
Number of Bedrooms in excess of 5					B
Total Finished Floor Area Above Grade					C
Fixture Counts	# of	Fixture Units	Total Fixture Units		
Kitchen Sink		1.5			
Laundry Washbasins		1.5			
Washing Machine with 2 in. trap		1.5			
Bathroom Group		6			
Water Closets		4			
Lavatory		1.5			
Bathtubs (with or without shower)		1.5			
Shower	1 head		1.5		
	2 or 3 heads		3		
	4 to 6 heads		6		
Floor Drain	2 in. trap		2		
	3 in. trap		3		
Other					
Total Number of Fixture Units					D
<b>Total Daily Design Sanitary Sewage Flow (A + the greater of B, C or D)</b>					



Building Department  
 100 Wellington Square  
 Brantford, Ontario, N3T 2M2  
 Phone: (519) 759-4150, Fax: (519) 752-1874  
[www.brantford.ca](http://www.brantford.ca)  
[building@brantford.ca](mailto:building@brantford.ca)

## Sewage System Design Summary – Single Detached Dwellings

Sewage System Design Information					
Class of System (OBC 8.1.2.1) (circle one)	1	2	3	4	5
Working Capacity of Septic Tank (L) (OBC 8.2.2.3)					
Classification of Treatment Unit (if not a septic tank) (OBC Table 8.6.2.2) (circle one if applicable)	Level II	Level III	Level IV		
Manufacturer and Model Number of Treatment Unit  Note: provide copy of CAN/BMQ 3680-600 approval or BMEC approval (if not a septic tank) (OBC 8.6.2.2)					
Percolation Time of Soil  Note: provide site evaluation report (OBC 8.2.1.2)					

Leaching Bed Design Information			
Type	Height of Bed Above Original Grade	Total Length of Distribution Pipe	Contact Area Size
Absorption Trench (OBC 8.7.3)			
Fill Based Absorption Trench (OBC 8.7.4)			
Filter Bed (OBC 8.7.5)			
Shallow Buried Trench (OBC 8.7.6)			
Type A Dispersal Bed (OBC 8.7.7.)			
Type B Dispersal Bed (OBC 8.7.8)			

Personal information contained in this form and schedules is collected under the authority of subsection 8(1.1) of the *Building Code Act, 1992*, and will be used in the administration and enforcement of the *Building Code Act, 1992*. Questions about the collection of personal information may be addressed to: a) the Chief Building Official of the City of Brantford, 100 Wellington Square, Brantford, N3T 2M2, (519) 759-4150, or, b) Director, Building and Development Branch, Ministry of Municipal Affairs and Housing 777 Bay St., 2nd Floor, Toronto, M5G 2E5, (416) 585-6666.