



Revised 09/02/2022

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Connection to Municipal Sewer

(Submit this to the Building Official at time of 1st inspection)

Registered Owner(s): _____

Site Address: _____

System Installed By:

☐ Resident Homeowner

☐ Certified Plumber _____

Signature & B.C. Tradesman Certification No.

System Specifications:

☐ Typical Gravity Flow System (min. 1/4 inch per foot)

☐ Low Pressure Pumped System

☐ Other (Specify) _____

SITE PLAN / AS BUILT DRAWING

Indicate Location Of:

☐ Municipal Connection

☐ Driveway(s)

☐ House(s)

☐ Other Buildings

☐ Existing Septic Tank

☐ Path of Building Sewer

☐ Other Relevant Details

☐ North Arrow

**Include basic dimensions
showing distance of
Building Sewer to
recognizable above-ground
features (e.g. trees,
buildings, property lines)**

Office Use Only: