

## FOR A PRIVATELY-OWNED SEWAGE COLLECTION SYSTEM CONSTRUCTED UNDER A TYPE 4.01 GENERAL PERMIT

PROJECT NAME	PROJECT INFORMATION
	COP Project (KIVA) No.
	LPR No
Address:	SDEV No.
	Permit No.
PROJECT APPLICANT	PROFESSIONAL ENGINEER INFORMATION
Name:	Name:
Firm:	Firm:
Address:	Address:
Project Description including title of plat and legal description with Section, Township and Range:	
provided to owner/operator.  Recorded CC & R's providing evidence of financial preplacement responsibility of the sewage collection sownership group submitted.  Other:  This Discharge Authorization is issued in accordance with	bmitted.  and emergency contact number for certified operator provisions regarding the operation, maintenance and system by the homeowner's association or other
under terms and conditions of the general permit and ap 49, Chapter 2, and Arizona Administrative Code Title 18,	plicable requirements of Arizona Revised Statutes Title , Chapter 9.
City of Phoenix Health Delegate	Date
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For more information or for a copy of this publication in an alternate format, contact Planning & Development at 602-262-7811 voice or TTY use 7-1-1.