



# CASS COUNTY, MISSOURI

## Building Codes, Environmental Health, And Zoning Department

30508 S. West Outer Road, Harrisonville, MO 64701  
P- (816) 380-8134 F- (816) 380-8130

Last Updated May 10, 2011

### CASS COUNTY ON-SITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT APPLICATION

In order to process your application for a building permit the following information, is required to be submitted at the time of application. Applications cannot and will not be accepted electronically or by machine. Completed application and all associated information must be made at the Cass County building codes department by the applicant t/ permit Holder.

**Before making application, please check with the Building Codes, Environmental Health, and Zoning office for any changes or revisions to this application packet.**

1. A completed permit application questionnaire provided as a part of this packet. All information requested on the application questionnaire is required to be answered. It is the applicant's responsibility to provide the following information our staff are unable to assist in obtaining the information.
  - Fire District
  - Water District
  - School District
2. The complete legal description of the property on which the building is to be constructed.
3. A Plot plan showing all information required by item #2 below.
4. Site Evaluation form and results of soil test as performed by a licensed percolation tester or a soil scientist.
5. Details showing the typical cross section dimensions of the absorption trench including but not limited to: depth, width, size, type, and depth of gravel; size, type and depth of pipe or chamber; depth of fill; type of restrictive layer (landscaping fabric, fiberglass, paper, etc. )
6. Completed Application
7. Soil Data at site location, either percolation test or soil morphology evaluations. Percolation tests must be preformed by a certified percolation tester, Soil Morphology must be provided by a soil scientist.
8. A letter from the 911 coordinator for the new address.
9. If construction is taking place in any subdivisions a Road Impact Fee may due. You will need to contact the Planning and Zoning Department about this issue.
10. A \$300.00 Onsite Sewage fee for new systems is due upon making application. A \$75.00 Fee for Exemption permits.

NOTE: All plans, specifications and other information which is required to be submitted will be retained by the Cass County, Missouri Building Codes, Environmental Health, and Zoning Department as a part of the public record concerning a building permit or building permit application and **will not be returned** to an applicant. If any of the documents, which are submitted, are needed for an applicants use, copies should be made before submitting the documents to the building codes office.

**Work shall not be started until a permit has been issued!**

By being the permit applicant/ permit holder you are taking full responsibility for the Onsite Sewage project. You being the permit applicant/ permit holder will be the point of contact for all issues regarding the project from start to finish.

Plans are required to be reviewed for compliance with various county ordinances and codes and you should allow up to 10 working days for your plans to be reviewed although depending on the work load your plan review should be completed within 5 to 7 working days. Incomplete plans and specifications may not be accepted or if plans are incomplete and require more than one hour of review time additional fees may be assessed at the rate of \$97.00 per hour with a minimum of one-half hour charge being assessed. The information which is being requested in this letter is a part of the building codes department plan review check list and plans which do not contain all requested information may be rejected and a delay in issuance of your building permit may result.

### **PLAN REQUIREMENTS:**

1. Plans will **NOT** be accepted by electronic means. All plans for the project shall be of the same size.
2. Site Plan of the property shall include the following information and must be prepared by the installer or engineer showing the following minimum information:
  - a) Lot lines, dimensions and total lot area or acres
  - b) North arrow
  - c) Any easements shall be shown with their established dimensions.
  - d) Show all existing buildings already present on parcel of property on which proposed building is to be erected.
  - e) Shows planned location of new building and provide setback dimensions between proposed building and all property lines and any existing buildings. For setback requirements please contact the Cass County Zoning Department.
  - f) Indicate location of: Absorption Field      Serial Dist (land Block)      Flat lot Layout  
Total Absorption Area      Easements      No. of Trenches      Trench Width  
Trench Depth      Tank Geological Features      Soil Morphology Pits or Percolation Holes  
Indicate direction of surface drainage      Springs, sinkholes and caves  
Proposed and/or existing wells (in use or abandoned)  
Flowing or intermittent streams or watercourses, ponds, lakes and floodplain boundaries  
Any other conditions which may affect the design or performance of the system
  - g) Location of proposed septic tank and absorption field or other proposed system.
  - h) Slope of ground surface across absorption field area. Spot elevations or topographic contours may be used. Show Grade to nearest ½ percent.
  - i) Existing utility lines and easements.
  - j) Existing or proposed swimming pools.
  - k) Existing or proposed drives, parking lots or other paved or gravel surfaced areas.

**If a lagoon or evaporation pond is being installed, the distance of neighboring residence(s) must be indicated**

This information may or may not be all that is required for each individual Onsite Sewage design. If additional information is required during the review process the permit applicant or designated design professional will be contacted.

If you have any questions regarding the required information please feel free to contact the Cass County Building Codes, Environmental Health, and Zoning Office.



**CASS COUNTY BUILDING CODES,  
ENVIRONMENTAL HEALTH  
AND ZONING DEPARTMENT**

Permit #. _____ OFFICE USE ONLY
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**ON-SITE SEWAGE PERMIT  
APPLICATION QUESTIONNAIRE**

Date of Application: \_\_\_\_\_

**All information must be complete before making application.**

**Property Information**

911-Address							
Post Office		Sec/Twn/Rng		Property Area		(acres)	
Lot #	Block	Subdivision					
Fire District		Water District		School District			
Electrical Supplier		Electrical Service Rating		(amps)			
Heat Type		Electric	LPG	Natural Gas	Fuel Gas Supplier		

**Property Owners Information**

Owner's Name	
Owner's Address	
City / State / Zip	

**On-Site Sewage Disposal System Information**

System is	New Construction	Repair Existing System	Exemption				
System Serves	# of Bedrooms	# of Bathrooms	Full	Half			
Percolation Rate	(min/inch)						
Soil Morphology	Soil Type	Soil Texture	% Clay	Application Rate			
System to be used							
Sewage Tank Type	Liquid Capacity	(gal/GPD)	Square Footage of Lateral Field				
Septic	Aerated	NSF Class I	Yes	No	Distance From	House	Well
Waste Stabilization Pond	Dimensions						(length x width or Diameter)
Total water surface Area	Square ft	Working Depth	Pond Seal	Equip Used			

Percolation Tester / Soil Scientist \_\_\_\_\_  
 Contact Person \_\_\_\_\_  
 Address \_\_\_\_\_  
 \_\_\_\_\_  
 Phone \_\_\_\_\_  
 Alternate Number \_\_\_\_\_  
 E-mail \_\_\_\_\_

On-Site Sewage System Installer \_\_\_\_\_ Registered \_\_\_ Yes \_\_\_ No  
 Contact Person \_\_\_\_\_  
 Address \_\_\_\_\_  
 \_\_\_\_\_  
 Phone \_\_\_\_\_  
 Alternate Number \_\_\_\_\_  
 E-mail \_\_\_\_\_

Design Professional/ Discipline \_\_\_\_\_  
 Contact Person \_\_\_\_\_  
 Address \_\_\_\_\_  
 \_\_\_\_\_  
 Phone \_\_\_\_\_  
 Alternate Number \_\_\_\_\_  
 E-mail \_\_\_\_\_

**Permit Applicant Information**

Applicant Social Security # / Tax ID # / Drivers License #					
Applicant Name					
Applicant Address					
City / State / Zip					
Phone		Mobile			
Fax		Alternate Phone			
Applicant's Position	Installer		Owner		Authorized Agent

By signing this form you are taking FULL Responsibility for On-Site Swage System Installation as well as the Property owner confirms and agrees that the Locations of proposed system components and any conditions described may not be altered without prior written approval of the Flood Plain Administrator, and that the county is hereby granted authorization to enter upon the subject property, following reasonable notification to the Owner and/or agent, to confirm the conditions of this permit.

Signature of Installer or Authorized Agent

Signature: \_\_\_\_\_ Print: \_\_\_\_\_

**OFFICE USE ONLY BELOW**

This property has been reviewed by the County Flood Plain Administrator to evaluate the relationship of the project to any potential flood issues as indicated in the current NFIP mapping system. The results are:

The  Residence  septic system appears to be located in the area designated as subject to a 1% Annual Chance of Flooding.

The  Residence  septic system DOES NOT appear to be located in the area designated as subject to a 1% Annual Chance of Flooding.

Conditions: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
 Lee Morris, Cass County Flood Plain Administrator

\_\_\_\_\_  
 Date

Construction Inspection Approval		Pump Tank Inspection		Lagoon Fence Inspection	
Date	EPHS Initial	Date	EPHS Initial	Date	EPHS Initial