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FORM 4 GENERAL DESIGN DATA

1. Volume of Sanitary Sewage, gal _____ Garbage Disposal Unit- Yes No
Residential: No. of Dwelling Units _____ Total No. of Bedrooms _____

Commercial/Institutional-indicate type of establishment and show method of calculation. If estimate is based on water meter data, indicate source of data, frequency of readings, average daily flow, and maximum recorded daily reading _____

2. Alteration or Repairs a) reason for Alteration Repairs (Check appropriate categories):
 Expansion or Change in Use Upgraded Existing Facilities Correct Malfunctioning System
 Other-Specify _____ b) Describe Nature of Alteration or Repairs _____

3. System Components:

a) Grease Trap Capacity, gals _____ Show Calculation Used: _____

b) Grease Trap Capacities, gals _____ First (Single) Compartment _____
Second Compartment _____ Third Compartment _____

c) Effluent Distribution Method: Gravity Flow Gravity Dosing Pressure Dosing Dosing Device
 Pump Siphon

d) Dosing Tank Capacities, gals Total Capacity _____ Dose Volume (Vd) _____ Reserve Capacity _____

e) Laterals: Number _____ Total Length ft. _____ Pipe Diameter, in _____ Spacing ft. _____

f) Connecting Pipe: Diam., in _____ Length ft. _____ Pipe Diameter, in _____ Length, ft. _____

g) Manifold: Diam., in _____ Length _____

h) Disposal Field: Design Permeability Percolation Rate:
 Trenches: Width., ft. _____ Total Length., ft. _____ Bed: Area. Sq., ft. _____

i) Seepage Pits: Design Percolation Rate _____ Number of Pits _____

4. Attachments (check items included): General Plan of Systems Showing Location of All System Components X-
Sections of Each System Component Including Grease Trap, Septic Tank, Dosing Tank, Disposal Field, Seepage Pits
and Interceptor Drains Pump Performance Curve

5. I on Hereby certify that the information furnished on Form 4 of this application is true and accurate. I am aware
that falsification of data is a violation of the Water Pollution Control Act (N.J.S.A 58:10A-1 et seq.) and is subject
to penalties as prescribed in N.J.A.C. 7:14-B.

Signature of Soil Evaluator _____ Date ____/____/____