



Water Authority—Cayman

OWMP : Onsite Wastewater Management Programme

**Standard Onsite Wastewater Treatment System Proposal Form**

Completed applications may be submitted via email to [developmentcontrol@waterauthority.ky](mailto:developmentcontrol@waterauthority.ky), or hand delivered to the Water Authority's Administrative Office at 13G Red Gate Road, George Town.

**Section 1: Property Information**

<b>Block Parcel:</b>	<b>WAC Ref:</b>	<b>Planning Ref:</b>
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**Section 2: Developer Information**

<b>Company Name:</b>	<b>Phone Number:</b>
<b>Contact Name:</b>	<b>Email Address:</b>

**Section 3: System Supplier Information**

<b>Company Name:</b>	<b>Phone Number:</b>
<b>Contact Name:</b>	<b>Email Address:</b>

**Section 4: Aerobic Treatment Unit\* (ATU) Proposal Information:**

\*Must have third-party certification equivalent to NSF/ANSI 40 Standard

BUILDING(S) SERVED	REQUIRED CAPACITY (GPD)	PROPOSED SYSTEM (MAKE & MODEL)	PROPOSED CAPACITY (GPD)
<b>TOTAL:</b>			<b>TOTAL:</b>

**Section 5: Required Attachments**

	Site plan/ sketch indicating layout of proposed wastewater treatment system (all components from building outlet to well). Layout shall meet Planning Department setbacks and provide access for maintenance and inspection. Disposal wells shall be located at least 100 feet from any shoreline (sea, lake or canal), or as far as practical given lot dimensions.
	Profile plan/ sketch indicating flow line from the building sewer stub-out through all system components, <b>with treated effluent plumbed to the disposal well at a minimum invert level of (site specific; TBD by WAC) above MSL</b> . Minimum invert levels are required to maintain an air gap between the invert level and the water level in the well, which fluctuates with tides and perching of non-saline effluent over saline groundwater (a function of casing depth).
	Details on any flow splitting device(s)
	Details on any lift station(s): wet well dimensions, pump specifications, pump ON, OFF and ALARM levels
	Other, if indicated here:

**Section 6: Optional Information recommended for consideration of cost of operation; i.e., kWh/year**

For each electrical component; e.g., aeration device, pump, etc., list the following:

COMPONENT TYPE	MAKE / MODEL	WATTAGE	HOURS OF USE per DAY	kWH/day = WATTAGE x HOURS per DAY
			<b>Total kWh / day:</b>	

**Section 7: Certification**

I certify that the information contained in this application and its attachments is accurate and complete.

<b>Printed Name</b>	<b>Signature</b>	<b>Date Signed</b>

The proponent is advised that submission of a proposal does not imply approval.

Complete, routine proposals will be reviewed within two weeks of receipt; the Developer and Supplier will be advised in writing regarding the outcome of the review. Incomplete Proposals will be returned within one week with deficiencies noted.

**Section 8: For Official Use**

<b>Date of Receipt</b>		<b>Date of Response</b>	
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