



- New sewage system
- Registration of change of existing sewage system
- Connecting to existing approved sewage system
- Renewal of permission

**Property****Applicant**

Description of property:	Name of applicant: *)	Personal Id No./ Org.nr:
Property address:	Address:	Telephone:
Postal address:	Postal address:	Mobile number:
Addressee of the invoice (if other than applicants):		Personal Id No./ Org.nr:
Addressee of the invoice:		
E-mail:		

\*) If using a delegate, a warrant needs to be enclosed with the application.

**Type**

<input type="checkbox"/> Permanent residence	<input type="checkbox"/> Holiday house _____ weeks/year
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**Location of property**

Is the property located within a water protection area?		
<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Don't know

**What is to be connected to the sewage treatment plant?**

Number of households: _____	<input type="checkbox"/> Complement building
<input type="checkbox"/> WC	
<input type="checkbox"/> bathing,- dish washing- and laundry drains (BDL)	
<input type="checkbox"/> Bathtub	Volume: _____ liter

**Sewage treatment plant**

Product name:	Model/volume:	Dimensioning:
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**Alarms:**

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**Service agreement:**

<input type="checkbox"/> Yes. Company:	<input type="checkbox"/> No. Treatment plant will be serviced by:
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### Finishing treatment

<input type="checkbox"/> Phosphorus trap (limestone filter)	Product name: _____	Amount: _____ kg
<input type="checkbox"/> Soak away, particle size: _____ mm	Volume: _____ m <sup>3</sup>	
<input type="checkbox"/> UV-light		
<input type="checkbox"/> Other:		

### Testing point of cleaned water

<input type="checkbox"/> In the treatment plant
<input type="checkbox"/> In an testing well after the treatment plant
<input type="checkbox"/> Other:

### Sludge managing

<input type="checkbox"/> Municipal
<input type="checkbox"/> Recycling sludge on the property (Application for permits for recycling humanure/sludge on the property, please use form "Application for composting toilette and handling of sewage from toilette and sludge")
<input type="checkbox"/> Sludge dehydrator, Product nm: _____ (Application for permits for composting on the property, please use form "Application for dry toilette and handling of sewage from toilette and sludge")

### Water supply

<input type="checkbox"/> A dug well	<input type="checkbox"/> Drilled well	<input type="checkbox"/> Collective, with properties:
<input type="checkbox"/> Desalinated seawater	<input type="checkbox"/> No water	

### Existing sewage treatment systems

<input type="checkbox"/> Gray water (bath,- dish washing and laundry)	<input type="checkbox"/> Composting toilet, product nm: _____
<input type="checkbox"/> WC	<input type="checkbox"/> Other: _____
Will any part of the existing sewage treatment system still be used?	
<input type="checkbox"/> Yes, which part: _____	
<input type="checkbox"/> No	
<input type="checkbox"/> Some of it, which part: _____	

### Contractor

Name:	Company name:	Phone number:
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### Following documents have to be attached to the application:

1. A site plan/map according to scale, equal to "Karta för ansökan om enskilt avlopp/strandskyddsdispens" (The site plan/map can be ordered from the GIS-department at Värmdö municipal). The site map must show:
  - The property with existing and planned buildings
  - How the sewage pipes connect the building/s to the sewage system
  - Location of the sewage system on the property (sludge separator, distribution well, infiltration area, testing well, finishing treatment, septic tank)
  - Distance and direction to all water sources within 100 m from the sewage system
  - Distance from the sewage treatment area to parking space for vehicle for sludge removal
2. A report of how the limestone filter in the phosphorus trap will be handled (when phosphorus trap is used)
3. Description of the grease trap; product name, standard and volume (only for food businesses)

## Other information

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**I hereby verify that all information above are correct.**

**When signing this form you have payment liability, unless a valid warrant for a delegate is sent in to the Planning-, environment- and health protection board**

**Applicants' signature – for businesses a proof of authorized signatory is needed**

City and date:	City and date:
Signature:	Signature:
Clarification of signature:	Clarification of signature:
Personal Id No./ Org.nr:	Personal Id No./ Org.nr:

**For handling and reviewing of the application a fee will be charged according to current taxa. The taxa is available at the municipal home page. There is no fixed taxa for sludge removal, contact the Renhållning department.**

**Approval for using treatment systems for WC and BDL-water is time limited to 10 years.**

Please sent the **complete application form** to:

- [Varmdo.kommun@varmdo.se](mailto:Varmdo.kommun@varmdo.se) eller,
- Värmdö kommun  
Bygg- och miljöavdelningen  
134 81 Gustavsberg

*All information you leave in this form will be registered in a database at Värmdö municipal. By giving these information you thereby approve the registration of your information. The information is available for the public and they will be handled accordingly to the regulation in the Privacy Protection (1998:204). Information of the property is collected from the land registry at the Swedish Land Survey.*