



**MARICOPA COUNTY ENVIRONMENTAL SERVICE DEPARTMENT
WATER & WASTE MANAGEMENT DIVISION
ONSITE WASTEWATER PROGRAM**

301 West Jefferson Street, Suite 170, Phoenix, AZ 85003

Phone: (602) 506-6666 Fax: (602) 506-6925

Email: SepticQuestions@maricopa.gov Website: esd.maricopa.gov



**REQUEST FOR APPROVAL OF ALTERNATIVE FEATURE OF TECHNOLOGY, DESIGN,
SETBACK, INSTALLATION OR OPERATION PER A.A.C. R18-9-A312(G)
General Aquifer protection Permits 4.02 through 4.23**

<p>Owner Information:</p> <p>Project Name: _____</p> <p>Owner Name: _____</p> <p>Mailing Address: _____</p> <p>Phone: _____ Fax: _____ E-Mail: _____</p> <p>Site Address: _____ Parcel Number: _____</p>	<p align="center">For Agency Use Only</p> <p>Amount Paid \$ _____ (Review fee is \$75 per each requested change)</p> <p>Rec'd Date _____</p> <p>Rec'd By _____</p>
<p>Authorized Agent Information:</p> <p>Agent Name: _____ Company: _____</p> <p>Mailing Address: _____</p> <p>Phone: _____ Fax: _____ E-Mail: _____</p>	
<p>Requested By: _____ Signature: _____ Date: _____</p>	
<p>Rule Citation of Requirement for Which Alternative is Requested:</p>	
<p>Full Description of Requested Alternative:</p>	
<p>Justification of Requested Alternative (Attach any necessary calculations, drawings or other supporting documentation):</p>	
<p>REQUEST APPROVED:</p> <p><input type="checkbox"/> Equal or better performance <input type="checkbox"/> Site or system conditions addressed more satisfactorily</p> <p>Approved by: _____ Title: _____ Date: _____</p>	
<p>REQUEST DENIED:</p> <p><input type="checkbox"/> Not equal or better performance <input type="checkbox"/> Excessive review/research time needed</p> <p><input type="checkbox"/> Does not address site or system conditions better <input type="checkbox"/> Adverse impact to environment/other permittees</p> <p><input type="checkbox"/> Request insufficiently justified <input type="checkbox"/> Other: _____</p> <p>Denied by: _____ Title: _____ Date: _____</p>	

(Permit / File #)