## ALTERNATIVE TREATMENT SYSTEM CONTRACT

## AGREEMENT TO PERMIT (PASSIVE TYPE) ADVANCED TREATMENT SYSTEM

The legal description of the Property is: (attach if necessary)

roper	y Owner(s):					
Name:						
Addres	s:	Address:				
Name: Addres	S:	Name:Address:				
		y of, 20, by and between the LMAS ove-named Property Owner(s), who own the Property located at				
		, agree as follows				
1.	The Property Identification number is:					
2.	LMAS shall issue a permit to allow the Property Owners to install and use an approved alternative sewage disposal system ("System") on the Property, under the conditions set forth below. Failure of the Property Owner(s) to comply with these conditions will result in an order to discontinue use of the System until repairs and/or replacement of the System have been permitted and approved by LMAS.					
3.		be professional engineer or designer certifies the construction of ovides such certifications to LMAS within 30 days of the				
4.	The Property Owner(s) shall ensure that the System is maintained according to the manufacturer's specifications and recommendations, and shall meet LMAS's requirements for monitoring and oversight of the System.					
	An operation and maintenance manual is r					
5.		equired to be on site at all times.				
	- · ·	equired to be on site at all times.  while LMAS approves the plan for the System, it does not design ble if the system does not function as designed or intended.				
5.	the System, and therefore LMAS is not lia The Property Owner(s) further acknowled there is an inherent risk that the System we forth in the LMAS District Health Departs	while LMAS approves the plan for the System, it does not design ble if the system does not function as designed or intended.  ge that because the System is an alternative/experimental system ill not function well enough to comply with the standards set ment Upper Peninsula Environmental Health Code and the on-Site Sewage Treatment Systems Guidance Manual. The				
5. 7.	the System, and therefore LMAS is not liad.  The Property Owner(s) further acknowled there is an inherent risk that the System was forth in the LMAS District Health Department Minimum Requirements for Alternative Of Property Owner(s) assumes all risk of the The Property Owner(s) shall maintain the the System fails to function in compliance	while LMAS approves the plan for the System, it does not design ble if the system does not function as designed or intended.  ge that because the System is an alternative/experimental system ill not function well enough to comply with the standards set ment Upper Peninsula Environmental Health Code and the m-Site Sewage Treatment Systems Guidance Manual. The Systems non-compliance.  System so as not to create a public health concern or nuisance. I with the requirements established by LMAS, or if the Property et forth in the Agreement, they agree to immediately discontinue.				
5. 6. 7. 8.	the System, and therefore LMAS is not liad. The Property Owner(s) further acknowled there is an inherent risk that the System we forth in the LMAS District Health Depart. Minimum Requirements for Alternative O Property Owner(s) assumes all risk of the The Property Owner(s) shall maintain the the System fails to function in compliance Owner(s) fail to adhere to any condition so use of the System, and shall not use the System fails to immediately discontinue use of or existence of a public health concern or resistence.	while LMAS approves the plan for the System, it does not design ble if the system does not function as designed or intended.  ge that because the System is an alternative/experimental system ill not function well enough to comply with the standards set ment Upper Peninsula Environmental Health Code and the m-Site Sewage Treatment Systems Guidance Manual. The Systems non-compliance.  System so as not to create a public health concern or nuisance. I with the requirements established by LMAS, or if the Property et forth in the Agreement, they agree to immediately discontinue				

IN WITNESS WHEREOF, the author the day and year written above.	rized representative of the	parties hereto have t	fully executed this A	agreement on		
PROPERTY OWNER(S):						
Signature and typed/printed name			Date			
Signature and typed/printed name			Date			
Signature and typed/printed name			Date			
Signature and typed/printed name			Date			
Subscribed and sworn to before me, a	Notary Public, this	day of	, 20	)by		
(insert name of property owner(s) who	p appeared before notary)					
	Signature and type	Signature and typed/printed name, Notary Public				
	County	Sta	ate	<del></del>		
	My Commission E	Expires:				