

**AFFIDAVIT REGARDING PRIVATE ONSITE
WASTE TREATMENT SYSTEM (POWTS) SIZE
(FLOWS & LOADS AFFIDAVIT) (Black ink only)**

This affidavit is made by the owner to acknowledge a deficiency with the POWTS (flows and loads) and inform any subsequent owners of the occupancy limitations for this structure.	
Parcel Identification Number (PIN)	Affidavit date
Owner(s)	
I (we) owner(s) acknowledge that an application is being made to construct an addition or replace an existing structure that is in excess of the design capacity of the existing POWTS that currently serves the structure on the following property. (Provide complete legal description. Attach a second sheet if additional space is required.)	
_____ _____ _____ _____ _____	Return document to (name and address):

It has been determined that the existing private sewage system (or components thereof) located on the above described parcel of land is sized for # _____ bedrooms and is, therefore, not adequately sized to accommodate an increase in the number of bedrooms for the dwelling served or to be served. To resolve this situation without replacing the private sewage system at this time, the owner(s) of the above-described property agree to the following stipulations:

1. It is agreed that occupancy of this dwelling shall be limited to a maximum of _____ persons.
2. Occupancy exceeding this number may constitute a violation of State and County private sewage system regulations. The governmental unit may issue orders to correct and/or may commence legal action if at any time it is determined that occupancy exceeds the maximum listed number contrary to this agreement.
3. It is understood when the existing POWTS fails it shall be replaced with a properly sized and code compliant private sewage system. This information is on file in the office of the Oneida County, Planning and Zoning Department.
4. This agreement is binding upon the owner and his/her heirs, successors, and assignees. The owner shall have this agreement filed and recorded with the Oneida County Register of Deeds in a manner that will permit the existence of the agreement to be determined by reference to the property containing the sewage system.
5. This agreement will remain in effect until the government unit responsible for the issuance of sanitary permits for POWTS certifies that this restriction is no longer required.

Owner(s) signature(s) X _____ (Print name) _____ X _____ (Print name) _____ Subscribed and sworn to before me on this date: _____ _____ Notary Public My commission expires: _____	Oneida County Official Signature X _____ (Print name) _____ (Official's title) _____ Subscribed and sworn to before me on this date: _____ _____ Notary Public My commission expires: _____
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Drafted by: _____