



**USE PERMIT APPLICATION
FOR AN ON-SITE WASTEWATER TREATMENT SYSTEM (OWTS)**

IMPORTANT NOTE: All items listed below MUST be completed and submitted at the same time:

- Tri-County Health Department Use Permit Application form AND Application fee.
- Tri-County Health Department Inspection Report completed by a CERTIFIED inspector (an inspection report completed by an uncertified inspector will NOT be accepted). If multiple OWTS systems serve the property, then a separate inspection report and fee for each OWTS system must be submitted.
- Copy of the most recent septic tank pumper's receipt (if available).
- If the OWTS system needs to be repaired then a Minor or Major Repair Permit Fee may be applicable.

Completion of All Fields is Required

Date of Application: _____

Name of Applicant: _____

Street Number: _____ Street Direction: _____

Street Name: _____ Street Type: _____

Street Direction: _____ Unit Type: _____ Unit #: _____

City: _____ State: _____ Zip: _____

Applicant Phone: _____ Email: _____

Name of Property Owner: _____

Owner Phone: _____ Email: _____

Address of property for which Use Permit is requested:

City: _____ State: _____ Zip: _____

Number of Bedrooms (existing): _____

Is more than one building connected to the one OWTS system? Yes No

Are multiple OWTS serving the property? Yes No *(Complete a separate inspection form and fee for each OWTS)*

Reason for Use Permit (Check One): Sale Bedrooms Added (# Added _____)
 Change in Use (Commercial or Business) Addition of Mobile Home
 Other (explain): _____

Use Permit Inspector

Name: _____ Phone: _____ Email: _____

National Association of Wastewater Technicians (NAWT) Certification Number: _____