

## Application for License to Construct or Clean Onsite Wastewater Systems and Self-Contained Toilets

		Date:	20
Classification (Check one	only)		
☐ Construction			
<ul><li>Tier 1</li></ul>			
■ Tier 2			
■ Tier3			
☐ Cleaning			
Number of Trucks:			
Applicant:			
□ Owner	□ Manager	☐ Corporate President	□ Other
Business Name:			
Mailing Address:	(Street & Number / P.		
	(City Ctat	e 9 7in Code)	
	-	e, & Zip Code)	
County:	Pho	ne Number:	
Billing Address:			
	(Street & Numbe	r / P.O. Box / Route & Box)	
	(City, State, &	& Zip Code)	
Fmail Address			
		and attach written proof that you have	
permission to use the appro	ived disposal facilities (complet	e only if you are applying for a septic cle	aning license):
List the provider(s) of the re	auired honding and insurance	coverage on the lines below (complete	only if you are
applying for a Tier 3 construc		coverage of the lines below (complete	orny ij you are
		ty supporting 5 years of experience wi	th no pending
disciplinary action involving	the construction of an onsite	wastewater system.	
In applying for this license,	I understand and agree that:		
		ollution Control Act (48 - 1 - 10 et seq.) ہ	may constitute
	or revocation of the license.		
	transferable from one person		
		imit the power of any municipal, count	
		ents or additional measures for the rest rstems or self-contained toilets.	riction of persons
constructing or cicuming	onsite serrage and disposal sy	stems of sen contained tollets.	

Applicant's Signature

## **For Department Use Only** RE-ADD business to the inventory. ADD a business to the Inventory. CLOSE business from the Inventory. CHANGE inventory information about business. B **Date**: \_\_\_\_\_\_ **Grade**: \_\_\_\_\_ **Examination No.:** A Exam Coordinator Print: \_\_\_\_\_\_ Sign: \_\_\_\_\_ Regional BRLS Office: License Number: Comments:



## Form Instructions Application for License to Construct or Clean Onsite Wastewater Systems and Self-Contained Toilets

- **Classification:** If applying for a septic installer license, the check box titled Construction must be checked. Indicate which installer license tier that is being applied for by checking the appropriate tier box. If applying for a septic pumper license, the check box titled Cleaning must be checked and applicant must indicate the number of pumps trucks that will be used.
- **Applicant:** Complete this section with the applicant's name.
- **Business Name:** Complete this section with the business name. If no business name exists, applicant's name should be listed.
- Mailing Address: Complete this section with the business mailing address.
- **County:** Complete this section by indicating what county the business is located in.
- **Phone Number:** Complete this section with the appropriate phone number.
- **Billing Address:** Complete this section with the billing address. Annual license renewal invoices will be sent to this address.
- **Septage Disposal Locations:** If applying for a septic pumper license, indicate what disposal facilities you plan to use. Applicants must also submit with the application approval letters from the disposal facilities giving them permission to dispose of wastewater at their facility.
- **Bonding and Insurance Coverage:** If applying for a Tier 3 construction license, indicate what companies you are using to obtain the required surety bond and insurance coverage. Applicants must also submit with the application proof of bond and insurance coverage.
- **Affidavits:** If applying for a Tier 3 construction license and your years of septic construction experience was obtained from an out of state regulatory authority, you must submit with the application affidavits supporting five (5) years of experience with no pending disciplinary actions involving the construction of septic systems.
- **Applicant Signature:** Applicant must sign the application once the above sections have been completed .

Page 2 of the application will be completed by a Department staff member.

In accordance with Retention Schedule 9312, DES 1777, Application for License to Construct or Clean Onsite Wastewater Systems and Self-Contained Toilets, must be retained within the regional office for three (3) years after the account is closed, then destroy.