

Fee \$125.00 per year (25% late fee if not registered prior to first job of the year)

2019
APPLICATION/REGISTRATION
HOUSEHOLD SEWAGE TREATMENT SYSTEM
SERVICE PROVIDERS

Lorain County Public Health
9880 South Murray Ridge Road
Elyria, OH 44035
Ph# 440-322-6367 Fax# 440-322-6010

Business Name _____

Business Mailing Address _____ City _____ Zip _____

Applicant's Name _____

Business Phone _____ Cell Phone _____

Home Address _____ Email _____

Send Mail To: (Check One) [] Business [] Home

If you are registered as a service provider in other Health Districts, please list them:

I hereby agree to comply with the Ohio Department of Health Household Sewage Regulation (O.A.C. Chapter 3701-29), and Lorain County Public Health Residential Sewage Regulations as they pertain to sewage system service providers. I acknowledge that copies of the above regulations are available at the Health Department for my review.

_____ Date _____ Service Provider's Signature _____

YOU ARE NOT REGISTERED UNTIL THE HEALTH DEPARTMENT HAS REVIEWED AND APPROVED THIS APPLICATION:

Office Use Only

Proof of testing requirements Yes [] No [] Proof of a surety bond Yes [] No []
Surety Bond # _____

Proof of 6 continuing education hours for 2018 Yes [] No [] Certificate of insurance Yes [] No []

Proof of system specific training Yes [] No [] Registration Approved Yes [] No []

Review/Approved by _____ Registered Sanitarian Receipt Number _____
Date _____ Check [] # _____
Cash []

Registration Number _____ Receipt by: _____