



ON-SITE WASTEWATER CONSTRUCTION PERMIT

Date paid: _____

Amount: _____

Receipt No. _____

This application will be accepted with payment of permit fee and the permit will be issued when system design is submitted by a Certified Designer (or Certified Installer for Standard Gravity System) and approved by Environmental Health.

APPLICATION

Form CP

APN #: _____

Traklt #: _____

Applicant Name (Please print) _____

Property Owner Name _____

Applicant Mailing Address _____

Construction Site Address _____

City _____ State _____ Zip _____

City _____ State _____ Zip _____

Applicant Telephone Number _____

Certified Designer (if applicable) _____

- New Construction
- Expansion
- Repair
- Tank Destruction

Certified Installer (if applicable) _____

Residential: Number of bedrooms: _____

Applicant Signature _____ Date _____

Non-Residential (specify): _____

PERMIT

DESIGN AND CONSTRUCTION APPROVAL

This permit is issued based on review of the attached design and has determined that it meets the requirements of Butte County Code Chapter 19 On-Site Wastewater Systems.

Environmental Health Specialist _____

Date of Issuance _____

Comments/Conditions: _____

- This permit valid only for installation of attached design, stamped "Approved." Variation from the approved design must have prior approval by Environmental Health.
- This permit valid only if system is installed by the homeowner or by a contractor with valid Installer Certification issued by Environmental Health.
- **This permit will expire 2 years from the date of Design and Construction approval.**

FINAL APPROVAL AND CERTIFICATE OF COMPLETION

Installation by: Homeowner Certified Installer As-Built Attached Designer Sign-off

Inspected by: _____ Comments: _____

Environmental Health Specialist _____ Date _____

This section completed by applicant

This section completed by Environmental Health

White – Environmental Health copy

Yellow – Customer copy: Final approval

Pink – Customer copy: Permit

Update: September 12, 2014