

**GRANT COUNTY HEALTH DISTRICT
PO BOX 37, EPHRATA WA 98823
(509) 754-6060**

ON-SITE SEWAGE CERTIFICATE APPLICATION

Please fill out in full..

FIRM NAME _____

INDIVIDUAL LICENSED _____

FIRM MAILING ADDRESS _____

BUSINESS PHONE # _____

CELL PHONE # _____

TYPE _____

CONTRACTORS LIC # _____ FOR THE YEAR OF: _____

**BONDING REQUIREMENT: Attach a copy of your Washington State Department of Labor and Industry Contractors License.*

INSTALLER **EXAM** * \$ 90.00

NEW _____ INSTALLER CERTIFICATION \$215.00 EA
_____ SEPTIC PUMPER CERTIFICATION \$215.00 EA
_____ each additional vehicle \$ 80.00 EA

RENEWAL _____ INSTALLER CERTIFICATION \$ 105.00 EA
_____ PUMPER CERTIFICATION \$ 105.00 EA
_____ each additional vehicle \$ 80.00 EA

Late fee or Operating without a valid certificate or septic permit **DOUBLE NORMAL
CERTIFICATE/PERMIT FEE**

**NEW APPLICANTS MUST TAKE A TEST AT THE HEALTH DISTRICT OFFICE IN THE COURTHOUSE OR IN THE MOSES LAKE SATELLITE OFFICE LOCATED AT 1038 IVY MOSES LAKE . PLEASE CALL IN ADVANCE FOR A TIME.*

CERTIFICATES ARE NOT TRANSFERRABLE AND EXPIRE ON DECEMBER 31.

***DO NOT WRITE BELOW THIS LINE**

Approval Date _____ By _____ Receipt # _____ Date _____ Amt. Received _____
Disapproval Date _____ By _____ Check # _____ Initial _____ Date Permit Mailed _____
Plaque # _____

*** \$30.00 OF EACH REQUESTED REFUND OF A LICENSE FEE WILL BE RETAINED BY THE HEALTH DISTRICT FOR ADMINISTRATIVE EXPENSES.**