

Adams County Health Department Environmental Health 7190 Colorado Blvd. Commerce City, CO 80022 303-288-6816 adamscountyhealthdepartment.org

APPLICATION FOR A LICENSE TO INSTALL ONSITE WASTEWATER TREATMENT SYSTEMS

New/Renewal \$35.00 - MAKE CHECKS PAYABLE TO ADCO Health

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Name of Applicant:						
Company Name:						
Name of Owner:						
Street Number: Str		Direction:				
Street Name:	Street	Туре:				
Unit Type: Uni	t #:					
		N				
City State	Zip	Phone:		_		
Email Address:						
The applicant certifies that he Wastewater Treatment System systems in compliance with the	ıs Regulation Ö-	22, and will construc	t all onsite wastew	ater treat		e
			•	ent.		
Name of Applicant (please prin	t)	Applicant	· 			
Name of Applicant (please prin	Signature of BELOW SPA				* :	k *
Name of Applicant (please prin	Signature of BELOW SPA	Applicant CE FOR ACHD O			* :	k *
Name of Applicant (please prin Date * * * * * * * * *	Signature of BELOW SPA	Applicant CE FOR ACHD O * * * * es □ No	FFICE USE* *	* *		* *
Name of Applicant (please print) Date * * * * * * * * * * Received NAWT Installer Certification	Signature of BELOW SPA	Applicant CE FOR ACHD O * * * * es No	FFICE USE* *	* *		k *
Name of Applicant (please print) Date * * * * * * * * * Received NAWT Installer Certification Passed Part A Exam	Signature of A BELOW SPA fication?	Applicant CE FOR ACHD O * * * * es No	FFICE USE* *	* *		k *