



LAKE COUNTY HEALTH SERVICES DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
 922 BEVINS COURT, LAKEPORT, CA 95453
 PHONE: (707) 263-1164 *** FAX: (707) 263-1681

ANY OMISSION OF INFORMATION MAY DELAY PROCESSING OF YOUR APPLICATION

OWNER: _____ PHONE/FAX: _____

MAILING ADDRESS: _____ CITY/STATE/ZIP: _____

APPLICANT: _____ PHONE/FAX: _____

MAILING ADDRESS: _____ CITY/STATE/ZIP: _____

CONTRACTOR: _____ PHONE/FAX: _____

LICENSE #: _____ CLASS: _____

MAILING ADDRESS: _____ CITY/STATE/ZIP: _____

JOB LOCATION	Site Address:		City:
	Nearest Cross Street:		Assessors Parcel Number:
PROPOSED USE	Single Family Residence?	YES NO	Number Of Bedrooms:
	Commercial Facility?	YES NO	Type Of Commercial Facility:
WATER SUPPLY	Public Supply Name:		
	Private Supply Source:		

_____(INITIAL) I understand that no service will be performed until I notify E.H. that the holes have been dug and I am aware that a fee will be due if the parcel is not properly prepared. DATE HOLES READY _____

By my signature, I certify that I am the owner or authorized representative and that the information I have furnished is correct, and hereby grant Lake County and its authorized agent permission to enter into the above described property for the purpose of this application. I have received a copy of the refund notice. I understand that there are no refunds on expired permits. _____

INITIAL

 Signature (APPLICANT/ AUTHORIZED REP.) Circle One

 Date

FOR OFFICE USE ONLY

	DATE RECEIVED	FEE	RECEIPT #
[] SITE EVALUATION/SOILS ANALYSIS (\$319.00)	_____	_____	_____
[] STANDARD SEPTIC PERMIT (\$473.00 + 50.00)	_____	_____	_____
[] SUPPLEMENTAL TREATMENT SEPTIC PERMIT (\$580.00 + 50.00)	_____	_____	_____
[] SAND FILTER/EXPERIMENTAL SEPTIC PERMIT (\$887.00 + 50.00)	_____	_____	_____
[] CAPPING FILL SEPTIC SYSTEM PERMIT (\$551.00 + 50.00)	_____	_____	_____
[] ALTERATION PERMIT (\$360.00) MINOR (\$203.00)	_____	_____	_____
[] SEPTIC REPAIR PERMIT (\$270.00) MINOR (\$120.00)	_____	_____	_____
[] SEPTIC PERMIT RENEWAL (\$63.00 – BEFORE EXPIRATION)	_____	_____	_____
[] (\$77.00 – AFTER EXPIRATION)	_____	_____	_____
[] FIELD CONSULTATION (\$101.00 PER HR)	_____	_____	_____
[] AUTHORIZATION INSPECTION (\$150.00)	_____	_____	_____
WORK DESCRIPTION:			
[] INSPECTION FOR LOAN APP. (CIRCLE ONE) SEPTIC (\$146.00) WATER (\$146.00 + 25.00) BOTH (\$194.00 + 25.00)	_____	_____	_____
[] ON-SITE VARIANCES (\$232.00)	_____	_____	_____
[] REINSPECTION (SEPTIC/OVER 2 INSP.)(\$72.00)	_____	_____	_____
[] OTHER	_____	_____	_____