

# Certification of Existence of a Wastewater Disposal System

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

SITE: ( ie-Subdivision / MHP/ Street Name/ Road)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

An on-site waste disposal system  
EXISTS / DOES NOT EXIST (Circle applicant finding)  
at the above referenced site and it is  
OPERATIONAL/ NON-OPERATIONAL (Circle applicant finding).

It will be used for its original intended purpose and will serve only one dwelling no  
dual hookups allowed.

Licensed Septic Contractor: \_\_\_\_\_

**Company Name License#**

\_\_\_\_\_

**Address:**

\_\_\_\_\_

**Signature/Date:**