



11660 Upper Gilchrist Rd.
Mount Vernon, OH 43050

www.knoxhealth.com

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2018 Registration Application for Sewage System Installer

Registration Fee \$125

I, _____ hereby apply for registration to install household
(Name)
sewage disposal systems in the Knox County General Health District.

Business Name: _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Phone: _____ **e-mail:** _____

Applicant's Name: _____

Address: _____ **Phone:** _____

I am also registered in the following counties: _____

I agree to comply with Ohio Administrative Code Chapter 3701- 29, Sewage Treatment System rules which serves as the governing rules for Sewage Installers in the Knox County General Health District and agree to comply with Regulation 801 of the Knox County Board of Health. A copy of the regulation is available on request or on our website at www.knoxhealth.com.

Signature: _____ **Date:** _____

OFFICE USE ONLY

Registration Approved Disapproved Registration # _____

By: _____ Date: _____