



# Skagit County Public Health

Keith Higman, Director  
Howard Leibrand, M.D., Health Officer

EH Permit ID: \_\_\_\_\_  
Fee: \_\_\_\_\_  
Date: \_\_\_\_\_  
Received by: \_\_\_\_\_

## ON-SITE SEWAGE SYSTEM INSTALLER CERTIFICATE APPLICATION

### ☐ New Installer

1. Written verification of education and experience
  - a. Pass a written examination approved by the Health Officer
  - b. Demonstrate any combination of training that is determined by the Health Officer to be equivalent to:
    - i. Two (2) years of full-time equivalent employment within preceding five years as an approved installer in Washington State; or
    - ii. Eight (8) CEUs of Health Officer approved classes applicable to installation
  - c. Provide evidence of compliance with the State of Washington Department of Labor and Industries requirements for the registration of contractors found in RCW Chapter 18.27
2. Applicable Fees

### ☐ Renewal

1. Document one (1) CEU (*8 hours*) of Continuing Education within previous 12 months
2. Applicable Fees

### Please Print

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

L&I Contractor's #: \_\_\_\_\_ WA State Business #(UBI): \_\_\_\_\_

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

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

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Email for publication on provider lists: \_\_\_\_\_

I, \_\_\_\_\_, of \_\_\_\_\_  
(Installer - Print Name) (Business Name)

\_\_\_\_\_  
(Mailing Address, City and Zip)

hereby submit both my application and required application fee for the profession of On-Site Sewage Disposal System Installer. I have read and understand the Rules and Regulations of the Skagit County (Skagit County Code 12.05) and Washington State Boards of Health governing the installation of on-site sewage systems.

Signature of installer: \_\_\_\_\_ Date: \_\_\_\_\_

**Incomplete forms and applications will be returned to the applicant and not processed**