



Skagit County Public Health

Monica Negrila, Director
Howard Leibrand, M.D., Health Officer

EH Permit ID: _____
Fee: _____
Date: _____
Received by: _____

2026 ON-SITE SEWAGE SYSTEM PUMPER CERTIFICATE APPLICATION

☐ New Pumper Certificate

1. Complete Application
2. Must have and maintain a current registration with Washington State Office of the Secretary of State and Department of Revenue, as required by business type
3. Pass the WOSSA O&M Level 1 certification examination, or equivalent
4. Demonstrate any combination of training that is determined by the Health Officer to be equivalent to:
 - a. Six months of full-time employment within the preceding three years as a certified septic system pumper in any other Washington State health jurisdiction
 - b. One CEU (8 credit hours) of Health Officer approved training applicable to septage pumping, transportation, and disposal
5. Provide a performance bond executed by a surety company that meets the following requirements:
 - a. Be in the sum of \$20,000;
 - b. Be executed by a surety company authorized to do business in the State of Washington;
 - c. Be conditioned that the holder of the pumper's certificate, in performing work governed by these rules and regulations, shall exercise all reasonable care and skill, and shall comply with all the terms and conditions of all applicable laws, ordinances and regulations, and cover the cost of clean-up of accidental or improper discharges of septage;
 - d. Be kept in effect during the period of time for which the pumper's certificate is issued;
 - e. Remain in force for one year following cancellation of or termination of a pumper's certificate; and
 - f. Be in a form satisfactory to the Skagit County Prosecuting Attorney
6. Pay all fees applicable for installer certification

☐ Renewal:

1. Complete Application
2. Provide a \$20,000 performance bond executed by a surety company that meets the same requirements listed in #5 above
3. Have no outstanding pumping reports for septage pumping completed in the previous 12 months
4. Pay all fees applicable for pumping certification

Please Print

Business Name: _____ WA State Business #(UBI): _____

Mailing Address: _____

Physical Address: _____

Phone: _____ Email: _____

Email for publication on provider list: _____

☐ Spanish? *Please check this box if you would like us to note on the provider list that there is a Spanish speaker avail.*

License Plate Number(s) on Truck(s): _____

Names of Pumper(s)*: _____

**Please include permit holder name, and those working under the permit holder*

I, _____, of _____
(Permit Holder - Print Name) (Business Name)

hereby submit my completed application, supporting documents, and required application fee for the profession of On-Site Sewage System Pumper, which includes the cleaning out, emptying, pumping out or disposing of the contents of any septic tank, cesspool, sewage pit, vault, privy, chemical toilet, holding tank, or other means of sewage disposal. I have read and understand the Rules and Regulations of the Skagit County On-Site Sewage Code (SCC 12.05) governing on-site sewage systems, including that I must:

- Submit on-site sewage system reports to the Health Office within 30 days of pump outs for all reports, and within 7 calendar days when a potential failure is identified.

Signature of provider: _____ Date: _____

Incomplete applications will be returned to the applicant and not processed

Completed applications and applicable fees can be submitted by mail with a check to Skagit County Public Health, 301 Valley Mall Way Suite 110, Mount Vernon, WA 98273.

If you would like to pay over the phone by debit/credit card, a completed application must first be received and signed off. A 3% processing fee may be assessed.

EH Staff Use Only:

☐ All required documents received

Outstanding Reports ☐ Yes ☐ No

☐ Applicable fees paid

☐ Active UBI#

☐ \$20,000 Surety Bond

☐ RME ID active

SKAGIT COUNTY PUBLIC HEALTH

301 Valley Mall Way, Suite 110, Mount Vernon, WA 98273 Phone 360-416-1500 septic@co.skagit.wa.us