

Skagit County Public Health
700 South 2nd Street, #301
Mount Vernon, WA 98273
Phone: 360-416-1500 FAX: 360-416-1501
www.skagitcounty.net/health
EH@co.skagit.wa.us



EH Permit ID: _____
Fee: _____ Receipt #: _____
Date: _____ Rcvd by: _____

LIVING ENVIRONMENT APPLICATION

Campground Mobile Home Park

Name of Facility: _____

Operator (Person's name responsible for day-to-day operation): _____

Legal Owner: _____

Facility Address: _____
City State Zip Code

Mailing Address: _____
City State Zip Code

Phone Numbers: _____ E-mail: _____
Daytime Evening Other

Water Source: Public Water System Name: _____

Open Year Round **OR** Seasonal Months Open _____ to _____

Days Open (check all that apply) Mon Tues Wed Thurs Fri Sat Sun

Maximum Occupancy of facility: _____

of toilets: _____ # of showers: _____ # of hand sinks: _____

Permit Fees – assessed according to Skagit County Schedule of Charges

5 or fewer On-Site Systems

6-25 On-Site Systems

>25 On-Site Systems

I certify that the information provided is accurate and correct. I agree to comply with Washington State and Skagit County Environmental Public Health and other applicable regulations regarding the above-named facility. I agree to provide access to the facility and records as required by code.

Signature: _____ Date: _____

Please return permit application with invoice and payment