



ENVIRONMENTAL DIVISION

P.O. BOX 889, COURTHOUSE WASHINGTON, IA 52353 (319) 653-7782 FAX (319) 653-7780

PRIVATE WASTERWATER DISPOSAL CONTRACTOR LICENSE APPLICATION

APPLICANT INFORMATION

Name:

Business Name:

Address:

City:

State:

Zip Code:

Phone:

Cell phone:

Email:

Fax:

CLOWTS Certificate#:

Bond on file:

The fee for the Contractor License Application is \$50.00

Please make checks payable to:
Washington County Environmental Department

I have read and understand Chapter 66 of the Iowa Administrative Code, On-Site Wastewater Treatment and Disposal Systems. I agree to comply with all Ordinances and Regulations of Washington County and the IDNR. If violations of this code occur, my Private Wastewater Contractor License may be revoked.

Signature _____ Date _____