



Applicant Information

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Name

Phone Number

Email Address

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Mailing Address

City

State

Zip

Site Information

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Property Address

City

State

Zip

Building Type: Single Family Duplex Commercial Other: _____

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Property tax account #

Type of On-Site Sewage System

of Bedrooms

Required Documentation

Ensure the following are on file with Snohomish County Health Department before submitting your application. To view as-built records and reports on file, visit www.snohd.org/159/As-Built-Records

As-built record*

On-site septic system inspection report from within the past 12 months.

Note: If pumping was recommended, there must also be documentation of pumping on the inspection report or a separate pump report.

**For systems without as-builts: Attach a site plan from a certified septic service provider.*

Applicant Signature & Date

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Applicant Signature

Date

HEALTH DEPARTMENT USE ONLY

No Deficiencies Deficiencies Identified

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EHS Signature

Date

Seller must provide this full application to the buyer at the time of property transfer.

All deficiencies must be corrected in accordance with Washington Administrative Code 272A-0270 and Chapter 5.55 Snohomish County Board of Health Code.