



APPLICATION FOR ON-SITE SEWAGE DISPOSAL INSTALLER
FEE: \$30.00 PAYABLE TO THE GRANT COUNTY HEALTH DEPARTMENT

Name of Business: _____

Business Address: _____

Business Telephone Number: _____

Personal Telephone Number: _____

E-Mail Address: _____

IOWPA Certified Installer: Yes or No Section: A B C All

Presby Sand Lind System Certified Installer/Designer: Yes or No

Infiltrator Sand Lined System Certified Installer/Designer: Yes or No

Document of Current, Valid, Good Standing Registration in Another Indiana County: Yes or No

Please circle if you offer the following:

Gravity/Flood Dosed Sand Mound Presby Eljen ATL Inspections Tank Pumping

Other Services

Number of Employees : _____

Please List All Employees who are certified:

A PERSON WHO IS CERTIFIED MUST BE ON SITE AT ALL TIMES.

Name: _____ IOWPA _____ ATL _____ Presby _____ Other _____

Name: _____ IOWPA _____ ATL _____ Presby _____ Other _____

Name: _____ IOWPA _____ ATL _____ Presby _____ Other _____

Name: _____ IOWPA _____ ATL _____ Presby _____ Other _____

Name: _____ IOWPA _____ ATL _____ Presby _____ Other _____

Name: _____ IOWPA _____ ATL _____ Presby _____ Other _____

Would you like to be listed on our Registered Installer List?

SUBMIT COPY OF CERTIFICATIONS MARKED ABOVE

For Official Use Only:

Application Approved: Yes or No

Conditions or Comments: _____

Signature: _____ Date: _____

Paid Date: _____ Cash: ☐ Credit : ☐ Check Number: _____

Environmental Division

765-651-2401 option 1

environmental@grantcounty.in.gov

401 S. Adams Street, Marion, IN 46953