

COLUMBIA COUNTY SUBSURFACE SEWAGE

Courthouse — Room 105
St. Helens, Oregon 97051

PERMIT NO. _____

New Construction

Repair

Other _____

(Property Owner's Name)

(Township)

(Range)

(Section)

(Tax Lot/Acct. No.)

ON-SITE SEWAGE DISPOSAL SYSTEM

(Address of Site)

(Issued By)

(Date Issued)

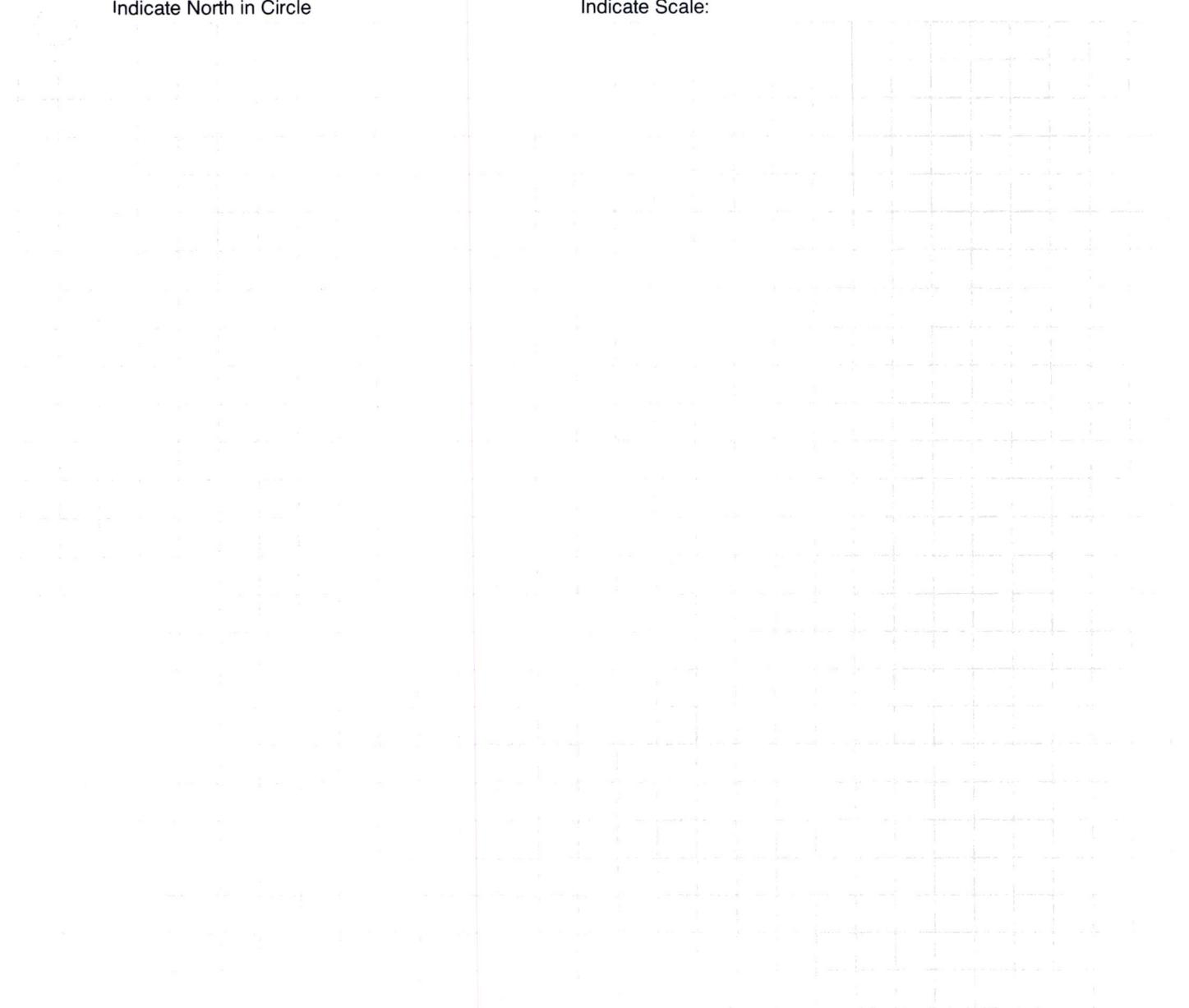
PERMITS ARE NOT TRANSFERABLE

ALL WORK TO CONFORM TO OREGON ADMINISTRATIVE RULES, CHAPTER 340. WORK SHALL BE DONE BY PROPERTY OWNER OR BY LICENSED SEWAGE DISPOSAL SERVICE. (MAKE NO CHANGES IN LOCATION OR SPECIFICATIONS WITHOUT WRITTEN APPROVAL.)

A certificate of satisfactory completion must be issued prior to use of the system (ORS 454.665.)

Indicate North in Circle

Indicate Scale:



Date _____ Applicant's Signature _____

