

# BOONE COUNTY HEALTH DEPARTMENT

116 W. WASHINGTON STREET - LEBANON, IN 46052  
www.boonecounty.in.gov/health

ENVIRONMENTAL DIVISION  
SUITE B201  
(765) 483-4458  
(765) 483-5243 FAX



BOONE COUNTY  
HEALTH DEPARTMENT

NURSING & VITAL RECORDS DIVISION  
SUITE B202  
(765) 482-3942  
(765) 483-4450 FAX

## Septic Installer License Application

To register your company with the Boone County Health Department please include \$25 and this application (please make checks out to the Boone County Health Department).

COMPANY'S NAME \_\_\_\_\_

Owner's Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_

Work/Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Fax \_\_\_\_\_ Email \_\_\_\_\_

Contact Person's Name \_\_\_\_\_  
(This will be the name put on the Boone County septic installers list)

Contact Person's Number \_\_\_\_\_ Circle One: Work/Home or Cell  
(This will be the number put on the Boone County septic installers list)

Gravity \_\_\_\_\_ Sand Mound \_\_\_\_\_ Presby Certified \_\_\_\_\_ IOWPA Certified \_\_\_\_\_  
Infiltrator ATL \_\_\_\_\_ GeoFlow \_\_\_\_\_

Please list other employees and their contact number in case of your absence:  
Person's Name Contact Number

1) \_\_\_\_\_

2) \_\_\_\_\_

3) \_\_\_\_\_

I have read the Indiana State Department of Health Rule IAC 6-8.3 Residential Sewage Disposal Systems and the Boone County On-site Sewage Disposal Ordinance and understand that any violation of the codes and/or requirements may result in the revocation of my license in Boone County.

Sign \_\_\_\_\_

Date \_\_\_\_\_