

## Onsite Wastewater Treatment Program Application for Onsite Wastewater Subdivision Review and Approval

*Print or Type*

Owner/Authorized Representative First Name Initial Last Name

Owner Business or Legal Entity Name (if applicable)

Owner Address City State Zip

Phone Number Email

Check here if authorized representative and include a description of the representative's authority to sign on behalf of the owner.

### **Professional Engineer, Certified Professional, or Registered Environmental Health Specialist**

*Print or Type*

First Name Initial Last Name Certification/License Number

Company Name

Mailing Address City State Zip

Phone Number Email

**Planned Development Area**      *Legal description*      OR      *Geographical coordinates to 4 decimal points*

1/4 1/4 Section Township Range County / Latitude Longitude

Physical address of system if different than owner's mailing address

Subdivision name

Lot numbers Total number of subject lots

Lots are < 1/4 Acre       Lots are > 1/4 but < 3/4 Acres       Lots are > 3/4 Acres but < 3 acres

**I swear or affirm that the application information and documentation submitted are true, complete and accurate.**

Owner/Authorized Representative Signature Date

NOTICE: Failure to complete the form or include the appropriate fee(s) will delay the application. NDEE approval is required prior to any construction in the development area.