

Commonwealth of Virginia

Application for: Onsite Sewage Operation Permit Renewal

VDH Use only
Health Department ID# _____
Due Date _____

Permit Number: _____

Owner _____

Phone _____

Mailing Address _____

Phone _____

Fax _____

Agent _____

Phone _____

Mailing Address _____

Phone _____

Fax _____

Site Address _____

Email _____

Directions to Property: _____

Subdivision _____ Section _____ Block _____ Lot _____

Tax Map _____ Other Property Identification _____ Dimension/Acreage of Property _____

Sewage System

Type of Approval Requested: Reissuance of renewable operation permit under 12VAC5-613-60C. "All Large AOSS and any AOSS permitted pursuant to 12VAC5-613-90C shall be subject to a renewable operating permit. Such permits shall be issued for a period of five years. The owner of the AOSS shall apply for a permit at least 180 days prior to the expiration date."

System Type: Large Alternative Onsite Sewage System Direct Dispersal to Ground Water

Permit Type: Operation Permit (Renewal)

Current Operation Permit Expiration Date: _____

Attach the following to the application

List of all operation and maintenance reports submitted to VDH since issuance of current operation permit

Dates and values for required monitoring data collected since issuance of the current operation permit

Are any upgrades needed to comply with current VDH regulations? (12VAC5-613 and 12VAC5-610) Yes No

If yes, has a schedule been provided for the upgrade? Yes No

I give permission to the Virginia Department of Health to enter onto the property described during normal business hours for the purpose of processing this application.

Signature of Owner/ Agent

Date