



Division of Environmental Health
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SYSTEMS CONTRACTOR

APPLICATION FOR A LICENSE TO INSTALL SMALL WASTEWATER SYSTEMS

PLEASE PRINT

A) **APPLICATION:** (Please make check payable to **"ENVIRONMENTAL HEALTH"**).

Please check appropriate category: New Fee: (\$375.00) _____ Renewal Fee: (\$185.00) _____
Individual _____ Corporation _____ Firm _____

B) NAME OF BUSINESS: _____ PHONE: () _____ (home/cell)

BUSINESS ADDRESS: _____

CITY: _____ ST: _____ ZIP: _____

C) If a corporation or firm, give the proper corporation/firm name, agent for service, and corporation/firm officers:

D) NAME OF APPLICANT: _____ PHONE: () _____ (home/cell)

MAILING ADDRESS: _____

CITY: _____ ST: _____ ZIP: _____

EMAIL ADDRESS: _____

E) THE APPLICANT CERTIFIES THAT HE/SHE IS FULLY ACQUAINTED WITH THE LARAMIE COUNTY SMALL WASTEWATER SYSTEMS REGULATIONS, SECTION 16, AND WILL CONDUCT THE BUSINESS IN COMPLIANCE WITH THE REGULATIONS.

DATE: ____/____/____ APPLICANT'S SIGNATURE: _____

ACTION BY HEALTH AUTHORITY: _____

DATE: ____/____/____ AUTHORITY SIGNATURE: _____