

Permit No. \_\_\_\_\_

**EASTERN IDAHO PUBLIC HEALTH DISTRICT  
Environmental Health Division**

1250 Hollipark, Idaho Falls, ID 83401  
208-523-5382 -- FAX: 208-528-0857

**INSTALLER REGISTRATION PERMIT APPLICATION**

Company Name: \_\_\_\_\_ Telephone: \_\_\_\_\_  
FAX: \_\_\_\_\_

Location of Business: \_\_\_\_\_

Installer Permit Holder: \_\_\_\_\_ Telephone: \_\_\_\_\_  
Mobile: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

If corporation or partnership, list company officers or general partners:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**NOTE:**

Please attach to this application a copy of your surety bond as required by Section 01.3006.05 of the regulations and the application fee (\$50.00 for Basic) (\$100.00 for Complex).

The aforementioned bond expires on December 31, 20\_\_\_\_\_

(The bond can be withdrawn by the surety on proper notice to the principal according to Chapter 26, Section 41-2612, Idaho Code.)

**I understand that the permit will not be transferrable and is based upon compliance with the Rules and Regulations for Individual and Subsurface Sewage Disposal Systems and may be suspended for violation of such regulations and standards.**

Signed: \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_

Printed on the reverse side of this application are the specific sections of the Rules and Regulations for Individual and Subsurface Sewage Systems which apply to the application procedure for an installer's registration permit.

For office use only

Amount Paid \_\_\_\_\_ Date Paid: \_\_\_\_\_ Receipt No. \_\_\_\_\_

## RULES AND REGULATIONS FOR INDIVIDUAL AND SUBSURFACE SEWAGE SYSTEMS

### 01.03006, INSTALLER'S REGISTRATION PERMIT

01. Permit Required. Every installer shall secure from the Director an installer's registration permit. Two types of installer permits are available:
  - a. Standard and basic alternative system installer's registration permit is required to install all individual systems not listed under Subsection 01.03006,01.b.
  - b. Complex alternative system installer's registration permit is required to install evapotranspiration systems, extended treatment systems, lagoon systems, large soil absorption systems, pressure distribution systems, intermittent sand filter, in-trench sand filter, sand mound or other systems as specified by the Director.
02. Examination. The initial issuance of the installer's permit shall be based on the completion of an examination, with a passing score of seventy (70) or more, of the applicant's knowledge of the principles set forth in this chapter and the applicable sections of the Technical Guidance Manual. The examination will be prepared, administered, and graded by the Director.
03. Permits Required Annually. Registration permits expire annually on the first (1st) day of January and all permits issued thereafter will be issued for the balance of the calendar year. Additionally at least one (1) refresher course approved by the State of Idaho, Department of Environmental Health, be attended every three (3) years.
04. Contents of Application. Applications for permits will be in writing, shall be signed by the applicant or by an officer or authorized agent of a corporation, shall contain the name and address of the applicant, shall indicate whether the permit is to be for installation of standard and basic alternative systems or for installation of standard, basic and complex alternative systems, and shall contain the expiration date of the bond required by Subsection 01.03006,05.

### 01.03006,

05. Bond Required. At the time of application, all applicants shall deliver to the Director a bond in a form approved by the Director in the sum of five thousand dollars (\$5,000) for a standard and basic alternative system installer's registration permit or in the sum of fifteen thousand dollars (\$15,000) for standard, basic and complex alternative system installer's registration permit. The bond will be executed by a surety company duly authorized to do business in the State of Idaho and must run concurrent with the installer's registration permit to be approved by the Director guaranteeing the faithful performance of all work undertaken under the provisions of the installer's registration permit. Any person who suffers damage resulting from the negligent or wrongful acts of the registrant or by his failure to competently perform any of the work agreed to be done under the terms of the registration permit shall, in addition to other legal remedies, have a right of action in his own name on the bond for all damages not exceeding five thousand dollars (\$5,000) for standard and basic alternative systems of fifteen thousand dollars (\$15,000) for complex alternative systems. The maximum liability of the surety and/or sureties on the bond, regardless of the number of claims filed against the bond, shall not exceed the sum of five thousand dollars (\$5,000) for standard and basic-alternative systems or fifteen thousand dollars (\$15,000) for complex alternative systems.

# ENVIRONMENTAL HEALTH

Eastern Idaho Public Health District  
1250 Hollipark Drive  
Idaho Falls, ID 83401

208-523-5382 --- FAX 208-528-0857

BONNEVILLE  
1250 Hollipark Dr  
Idaho Falls ID 83401  
208-523-5382  
FAX: 208-528-0857

CUSTER/LEMHI  
801 Monroe  
Salmon ID 83467-0280  
208-756-2122  
FAX: 208-756-6600

FREMONT  
45 S 2nd W  
St Anthony, ID 83445  
208-624-7585  
FAX: 208-624-0954

JEFFERSON/CLARK  
380 Community Ln  
Rigby ID 83442-0508  
208-745-7297  
FAX: 208-745-8151

MADISON  
314 N 3rd E  
Rexburg ID 83440  
208-356-3239  
FAX: 208-356-4496

TETON  
820 Valley Centre Dr  
Driggs ID 83440  
208-354-2220  
FAX 208-354-2224

## APPROVAL OF SEPTAGE DISPOSAL

\_\_\_\_\_ Hereby grants permission to:  
(name & address)

\_\_\_\_\_ for the disposal of Septic  
(name & address of pumper/operator)

tank sludge, scum, and liquid by the method marked below for Year 2013.

1 - Municipal System \_\_\_\_\_

2 - Other Methods [(specify) must be approved by DEQ] \_\_\_\_\_

DEQ approval: Date: \_\_\_\_\_ Signed: \_\_\_\_\_

Address/Location of disposal site: \_\_\_\_\_

Date: \_\_\_\_\_ Signed: \_\_\_\_\_ Title: \_\_\_\_\_  
(Site Owner or Agent)

Eastern Idaho Public Health District **must** approve each and every site, other than shown above, **prior** to disposal. (Includes land application on private property (one time only.)

Date: \_\_\_\_\_ Signed: \_\_\_\_\_ R.E.H.S.

Distribution: one copy each: Site Owner, Pumper, Health Department