CHATTANNOOGA-HAMILTON COUNTY HEALTH DEPARTMENT
DIVISION OF ENVIRONMENTAL HEALTH

Application for Use of Existing Septic System

	APPLICANT COMPLETE QUESTIONS:	FEES DUE
I. SERVICE REQUESTED: (check service)		
Existing Tank	2, 3, 4, 7, 8, 9	$_____

2. APPLICANT

Name:_____ Daytime: phone #_____

Address:_____ Fax #:_____

City, State, Zip:_____

E mail:_____

3. ADDRESS OF PROPERTY:_____

4. REQUEST IS FOR: Replacing mobile home_____ dimensions of old home_____

dimensions of new home_____

Adding: Garage_____

Pool_____ above ground_____ in ground_____

Living Space not including a bedroom_____

Bedroom_____ If a bedroom is being added then the applicant must fill out an application to modify their existing septic system, if possible, or sign an affidavit that the total number of bedrooms in the house will not change with the addition.

7. **MAKE A ROUGH SKETCH ON BACK OF THIS PAGE SHOWING PROPERTY LINES, HOUSE SITE, NEW ADDITION, AND ALL EXISTING DRIVEWAYS, DECKS, POOLS, UTILITIES, ETC.**

8. **ALL FEES ARE DUE IN ADVANCE**.
Make check payable to: Chattanooga-Hamilton County Health Department

9. I certify that the above information is true and correct to the best of my knowledge, and that I have been authorized to submit this Application for Environmental Services to the Division of Groundwater Protection.

DATE:_____ SIGNATURE_____AMOUNT PAID_____RECEIPT #_____