



THURSTON COUNTY
PUBLIC HEALTH AND SOCIAL SERVICES
Environmental Health Division
3000 Pacific Avenue SE - Room 225
Olympia, WA 98501
(360) 867-2673
EH_Tech@co.thurston.wa.us

CERTIFIED SEWAGE SYSTEM INSTALLER APPLICATION FORM

☐ New Company Certification ☐ Renewal ☐ Change of Business address
☐ Change of Business Name: Previous business name: _____
☐ New Individual Certification: New Employee name: _____

NAME: _____ DATE: _____
COMPANY NAME: _____
BUSINESS ADDRESS: _____
CITY: _____ STATE: _____ ZIP CODE: _____
BUSINESS PHONE (THIS WILL BE LISTED FOR CUSTOMERS): _____

2ND PHONE: _____

FAX: _____ E-MAIL ADDRESS: _____

L & I CONTRACTOR'S REGISTRATION #: _____
(Attach copy of registration)

List the names of all certified (tested) installers employed by this firm:

Please list all *on-site sewage system related* educational classes that have been attended in the past calendar year *by all certified installers* employed by this firm. Provide written documentation or a copy of the class certification, along with the dates and a brief description of the class.

Signature: _____

--FOR DEPARTMENT USE ONLY--

Date Recv'd: _____ Recv'd by: _____ Fee: _____ Receipt: _____

Examination passed Date _____ By _____

Re-examination Date _____ By _____

Certificate issued Date _____ By _____

COMMENTS: _____



Thurston County Public Health & Social Services

Environmental Health

3000 Pacific Ave

Olympia WA, 98506

(360) 867-2626

Professional Services Provided

Name of Firm: _____

Certification type (Select All That Apply): Designer ☐ Installer ☐ Monitoring Specialist ☐ Pumper ☐

Please only mark the services that your firm provides below

Services Provided	Yes
AdvanTex*	
AIRR	
Biomax	
BioMicrobics BioBarrier*	
BioMicrobics FAST*	
Camera Locating	
Chromoglass	
Clearstream*	

Services Provided	Yes
Clearwater*	
Complete Time of Transfer Process	
ECOPOD*	
Glendon*	
Gravity	
Grease Trap Pumper	
Jetting	
Jet Aeration*	

Services Provided	Yes
LOWeFlow/OSCAR*	
Mound	
Multiflo*	
Nayadic*	
Nibbler	
Nibbler Jr/Lite	
Norweco/Singular*	
NuWater*	

Services Provided	Yes
Portable Toilets	
Pressure Distribution	
Root Removal	
Salcor (Longwave)	
Sand Filter	
Subsurface Drip	
Tank Repair	
Whitewater*	

**You will need to provide documentation for the individual trained to work on the proprietary device or system.*

Comments: _____

Signature of firm representative _____ Date: _____

By signing above, I certify the information provided on this form is accurate.