

Combination and Maintenance License

Checklist

SUBMIT THE REQUIRED ITEMS LISTED BELOW ALONG WITH THIS CHECKLIST

Important: You are responsible for the accuracy of your applications and accompanying documentation. The accuracy of your documents affects the processing time. Your name must appear the same on all documents (Double check the spelling of your name). Do not make any changes to the endorsement(s) and/or insurance documents. If changes are needed on the endorsement, contact the manufacturer. If changes are needed on the proof of insurance, then contact the insurance company. If changes are needed on the endorsement, then contact the manufacturer.

Application packets can be retrieved from www.privatewaterandsewage.dhh.louisiana.gov

_____ A **completed** and signed Basic Application form. **All fields and signatures are mandatory.**

_____ A **completed** and signed Affidavit **All fields and signatures are mandatory.**

_____ A **completed** and signed Combination Application form. **All fields and signatures are mandatory.**

_____ A **completed** and signed Maintenance Application form. **All fields and signatures are mandatory.**

_____ Original endorsement(s) from a licensed manufacturer(s) for the brand(s) of individual mechanical plant to be installed and/or maintained, **signed if required.** (For endorsements which state maintenance/service only, a Maintenance License must be acquired.)

_____ Proof of insurance in the form of a certificate of insurance, or the declaration, that provides the name of the installer. The Office of Public Health name and address shall be listed on the policy as a Certificate Holder. The policy shall indicate minimum coverage limits of at least \$100,000 each occurrence/\$300,000 aggregate per person.

Note: Your policy must have your name on it as we do not issue installer licenses to companies.

_____ Check or money order, payable to LDHH/OPH for three hundred dollars U.S. (\$300.00).

Please Note: All application materials are due by December 1. LATE FEES of 10% will be assessed if all materials for licensure have not been post marked by March 2. Any application materials post marked later than May 1 will be assessed a fine of 100% of the cost of licensure. LATE FEES must be paid by separate check or money order. Failure to submit LATE FEES will result in application materials not processed until appropriate LATE FEE IS PAID IN FULL (authorized by L.R.S. 40:6.E).

Please note if your training has expired, please contact ULL at (337) 482-5712 or you can now register online at www.ce.louisiana.edu to enroll in the next available class. Training is required once every five years.

FOR OFFICE USE ONLY

Installer Name _____ License Number _____

Please correct the highlighted item(s) above and return you application.

Notes:



Louisiana Department of Health and Hospitals
 Office of Public Health Onsite Wastewater Program
 (<http://www.dhh.louisiana.gov/offices/?ID=215>)



APPLICATION FOR BASIC LICENSE

The Basic License is required for the installation and maintenance of septic tanks/field lines, septic tanks/oxidation ponds, septic tanks/sand filters, and limited use systems. (as per Title 51, Part 13, Subchapter C, §735, B, 2).

Licenses expire on January 31 of each year.

Please type or print in ink

IF-01/Basic
 Rev. 9/03/10

Date: _____

Name: _____

Address: _____

City, State, Zip: _____

Home Phone/Area Code: _____

Company Name: _____

Mailing Address: _____

City, State, Zip: _____

Business Phone/Area Code: _____

Fax Number: _____

Parish/County: _____

Current License Number: _____

Date of Last Training Class: _____

Email Address: _____

Signature of Applicant: _____

Check Appropriate Box(s):

- New Application
- Renewal
- Out of Business
- Changes of Name/Address
- Change of Company Name/Address

Mail completed application and required items to:
LDHH OPH CEHS
Onsite Wastewater Program
P.O. Box 4489 Baton Rouge, LA
70821-4489

Please Note: All application materials are due by December 1. LATE FEES of 10% will be assessed if all materials for licensure have not been post marked by March 2. Any application materials post marked later than May 1 will be assessed a fine of 100% of the cost of licensure. LATE FEES must be paid by separate check or money order. Failure to submit LATE FEES will result in application materials not processed until appropriate LATE FEE IS PAID IN FULL (authorized by L.R.S. 40:6.E.).

FOR OFFICE USE ONLY]

Logged in By: _____ Date: _____

M.O. or Check #: _____

License #: _____ PIV#: _____

Processed By: _____



Louisiana Department of Health and Hospitals
Office of Public Health Onsite Wastewater Program
(<http://www.dhh.louisiana.gov/offices/?ID=215>)



APPLICATION FOR COMBINATION LICENSE

The Combination license is required for the installation and maintenance of individual mechanical treatment plants. This license may be obtained only in conjunction with a basic license, and is considered to be a separate license (as per Title 51, Part 13, Subchapter C, §735, B, 2).

Licenses expire on January 31 of each year.

Please type or print in ink

IF-01/Combo
Rev. 9/03/10

Date: _____

Name: _____

Address: _____

City, State, Zip: _____

Home Phone/Area Code: _____

Company Name: _____

Mailing Address: _____

City, State, Zip: _____

Business Phone/Area Code: _____

Fax Number: _____

Parish/County: _____

Current License Number: _____

Date of Last Training Class: _____

Email Address: _____

Signature of Applicant: _____

Check Appropriate Box(s):

- New Application
- Renewal
- Out of Business
- Changes of Name/Address
- Change of Company Name/Address

Mail completed application and required items to:
LDHH OPH CEHS
Onsite Wastewater Program
P.O. Box 4489 Baton Rouge, LA
70821-4489

Please Note: All application materials are due by December 1. LATE FEES of 10% will be assessed if all materials for licensure have not been post marked by March 2. Any application materials post marked later than May 1 will be assessed a fine of 100% of the cost of licensure. LATE FEES must be paid by separate check or money order. Failure to submit LATE FEES will result in application materials not processed until appropriate LATE FEE IS PAID IN FULL (authorized by L.R.S. 40:6.E.).

FOR OFFICE USE ONLY

Logged in By: _____ Date: _____
M.O. or Check #: _____
License #: _____ PIV#: _____
Processed By: _____



Louisiana Department of Health and Hospitals
Office of Public Health Onsite Wastewater Program
(<http://www.dhh.louisiana.gov/offices/?ID=215>)



APPLICATION FOR MAINTENANCE LICENSE

The Maintenance License is required for servicing and maintaining of individual mechanical treatment plants when the **manufacturer endorsement specifies maintenance only** (as per Title 51, Part 13, Subchapter C, §735, B, 2).

Licenses expire on January 31 of each year.

Please type or print in ink

IF-01/Maintenance
Rev. 9/03/2010

Date: _____

Name: _____

Address: _____

City, State, Zip: _____

Home Phone/Area Code: _____

Company Name: _____

Mailing Address: _____

City, State, Zip: _____

Business Phone/Area Code: _____

Fax Number: _____

Parish/County: _____

Current License Number: _____

Date of Last Training Class: _____

Email Address: _____

Check Appropriate Box(s):

- New Application
- Renewal
- Out of Business
- Changes of Name/Address
- Change of Company Name/Address

Mail completed application and required items to:
LDHH OPH CEHS
Onsite Wastewater Program
P.O. Box 4489 Baton Rouge, LA
70821-4489

Signature of Applicant: _____

Please Note: All application materials are due by December 1. LATE FEES of 10% will be assessed if all materials for licensure have not been post marked by March 2. Any application materials post marked later than May 1 will be assessed a fine of 100% of the cost of licensure. LATE FEES must be paid by separate check or money order. Failure to submit LATE FEES will result in application materials not processed until appropriate LATE FEE IS PAID IN FULL (authorized by L.R.S. 40:6.E.).

FOR OFFICE USE ONLY

Logged in By: _____ Date: _____
M.O. or Check #: _____
License #: _____ PIV#: _____
Processed By: _____



Louisiana Department of Health and Hospitals Office of Public Health
 Onsite Wastewater Program
 (<http://www.dhh.louisiana.gov/offices/?ID=215>)



AFFIDAVIT

This affidavit must be submitted when applying for a combination, basic, maintenance, and /or homeowner licenses.
 Licenses expire on January 31 of each year.

IF-81706
 Rev. 9/03/2010

Date: _____

STATE OF LOUISIANA

PARISH OF _____

BEFORE ME, on this _____ day of _____, _____, the undersigned notary public, commissioned in and qualified for the Parish and State aforesaid, and the two undersigned competent witnesses, personally came and appeared:

Licensee: _____

Please Print

who, after being duly sworn, did depose and say:

I hereby certify that I have obtained, read, understand and shall comply with the provisions of the Sanitary Code (Title 51), Part 13, including Chapter 7, Subchapter B of this Part, and the requirements for minimum distance to sources of contamination in Part 12, and will make installations and/or provide maintenance in compliance therewith. I also certify that I am trained in the proper installation of all components which I intend to maintain in the State of Louisiana for the duration of this license. Furthermore, I understand that under provisions in Title 51, Part XIII, Subchapter C, §735.F.,G., licenses may be suspended or revoked by the agency for non-compliance with code provisions, and that licenses which are revoked are not eligible for reinstatement for a minimum period of two years.

 Notary Public

 Licensee Signature

Witnesses:

 Please Print

 Witness Signature

 Please Print

 Witness Signature

Mail to:
 LDHH/CEHS/Office of Public Health
 Onsite Wastewater Program
 P.O. Box 4489
 Baton Rouge, LA 70821-4489