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**FOR OFFICIAL USE ONLY**

Accepted By:

License #:

Date Processed:

Receipt #:

**ON-SITE SEWAGE Operation and Maintenance Specialist \$130  
License Application Form**

The O&M Specialist License is Valid from June 1<sup>st</sup> to May 31<sup>st</sup> of each calendar year.

Incomplete applications will not be accepted and will be sent back.

The license fee is non-refundable.

**Applicant Information**

Business Name:

Owners Name:

Mailing Address (City, State, Zip):

Business Phone Number:

Cell Phone Number:

Email Address:

**O&M Specialists**

O&M Specialists must pass WOSSA O&M Level 2. Provide proof of 16 hours of CEU's or WOSSA M-102 Basics of Maintenance and A-Z's of O&M and Troubleshooting of OSS. Additional qualifications may be required for alternative OSS. Technicians working under the license of an O&M Specialist must O&M Level 1

**Names of Technicians who will be engaging in O&M of On-Site Sewage Systems**

1.

4.

2.

5.

3.

6.

**Business Required Information**

Contractors Registration Number:

Proof of CEU's or WOSSA certification attached:

Technicians not previously listed certification attached:

*I certify that the information provided is accurate and correct. I agree to comply with Washington State and Kittitas County Environmental Public Health and other applicable regulations regarding the above-named business.*

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