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FOR OFFICIAL USE ONLY

Accepted By:

License #:

Date Processed:

Receipt #:

**ON-SITE SEWAGE PUMPER
License Application Form (\$130)**

Installers License is Valid from June 1st to May 31st of each calendar year.

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 (required):

Licensed Pumpers

List the names of all employees who will be engaging in the pumping and disposal of Septage under your business name.

1.

4.

2.

5.

3.

6.

List of all Vehicles or Specialized Equipment that will be used in Septage Management

Year	Make	Model	License Plate #

Business Required Information

Valid Contractors License Copy Submitted

Certificate of Liability Insurance copy Submitted

\$12,000.00 general contractor bond or \$6,000.00 specialty bond Copy Submitted

Would you like to be on an O&M Providers List: Yes No

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: _____