

**SIDNEY-SHELBY COUNTY
GENERAL HEALTH DISTRICT**

**APPLICATION FOR 2024 REGISTRATION AS A
SEWAGE TREATMENT SYSTEM SERVICE PROVIDER**

I hereby apply for a registration to service sewage treatment systems in the Sidney-Shelby County General Health District for the year 2024. I agree to abide by all the rules and regulations of the Ohio Administrative Code 3701-29 and the Sidney-Shelby County Health District, under penalty of possible suspension or revocation of this registration.

NAME OF REGISTRANT

NAME OF BUSINESS

ADDRESS CITY STATE ZIP

E-MAIL ADDRESS OFFICE PHONE CELL PHONE FAX

APPLICANT'S SIGNATURE DATE

*****DUE JANUARY 2, 2024*****

Notice: A fee of \$200.00 must accompany this application. A 25% penalty fee will be assessed if the application and fee are not received or postmarked by the due date.

NEW: All contractors renewing registration must submit proof of obtaining 6 hours of continuing education (CE) for registration. See attached Ohio Department of Health sewage treatment system contractor registration fact sheet and CEU information for registration requirements for 2024.



Mail application to: Sidney-Shelby County Health Department
202 W. Poplar St., Sidney, OH 45365

* * * * * **OFFICE USE ONLY** * * * * *

TOTAL PAID: _____ REGISTRATION #: _____

DATE PAID: _____ APPROVED: _____ DISAPPROVED: _____

RECEIPT #: _____

SANITARIAN DATE

- STS Test Passed
- Surety Bond (\$25,000)
- \$500,000 Liability Insurance
- Obtained continuing education hours