

Permit No. \_\_\_\_\_

# Butler County General Health District

Amt. \_\_\_\_\_

Water Closets

Dishwasher

Drinking Fountain

Additional Fixture

Lavatory

Auto Washer

Roof Drains

Reinspection

Bath Tubs

Bar Wastes

Effluent Pump

HSTS Alteration

Showers

Floor Drains

Sewage Ejector

HSTS New or Replacement

Sinks

Laundry Sump

Oil Interceptor

Re-Inspection HSTS

Garbage Grinder

Grease Trap

Urinals

State Portion Alteration

Laundry Trays

Water Svc. (NEW)

Mop Sinks

State Portion New

Water Heater

Water Svc. (EXIST)

Backflow

Water Softener

Sewer Connect

Backwater Valve

**TO SERVICE BUILDING**

New ( )

Old ( )

Nature of Remodeling \_\_\_\_\_

Residence ( )

Public Building ( )

Industrial ( )

Other \_\_\_\_\_

**NUMBER OF FIXTURES** ( )

**HSTS ABANDONMENT** ( )

**1 Year HSTS** ( )

**WATER SUPPLY:** Public ( )

Private ( )

Type \_\_\_\_\_

**SEWAGE DISPOSAL:** Public ( )

Private ( )

Type \_\_\_\_\_

Address: \_\_\_\_\_

Owner's Name: \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_

Developer: \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_

License Professional: \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_

Home Owner: \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_