



GWINNETT COUNTY ENVIRONMENTAL HEALTH RESIDENTIAL REPAIR PERMIT APPLICATION

Application Date: _____

Map # _____

OWNER INFORMATION	APPLICANT INFORMATION (if other than owner)
Name _____	Name _____
Address _____	Address _____
City, State, Zip _____	City, State, Zip _____
Home Phone () _____	Home Phone () _____
Work Phone () _____	Work Phone () _____
Fax () _____	Fax () _____
Other Phone () _____	Other Phone () _____
E-MAIL _____	E-MAIL _____
*Contractor: _____	
*If you have chosen a contractor, they may act as your agent in applying and picking up a repair permit. However, you must indicate this is the contractor of your choosing.	

Property Address: _____ City _____

Subdivision _____ Lot _____ Block _____

Current # Bedrooms _____ Garbage Disposal: Yes / No Property Water: Public / Well

Stub Out Location: Basement / Crawl Space / Slab (Basement w/ Plumbing) Tax ID _____

Backing Up in House/Business: Yes / No Surfacing in Yard: Yes / No When Was Tank Last Pumped? _____

O.K. to Enter Yard: Yes / No Fence with Gate: Yes / No

Dogs in Yard: Yes / No Laundry Loads Per Week _____

Type of Septic Field: Aggregate _____ Polystyrene _____ Chamber _____ Graveless _____
(Pipe & Gravel)

Check all below that are on or within 100' of property and indicate location: _____

Creeks _____ Ponds _____ Well, Spring, Sink Hole _____ Embankments _____ Gullies _____

E. H. RECORDS:
 _____ No record on file _____ Drawing of existing system attached _____ Soils from plat folder attached (if > 1990)

COMPLAINT ON FILE:
 _____ No _____ Yes Assigned to _____ #: _____

EXISTING FIELD:
 _____ Can be Preserved _____ Cannot be Preserved
 _____ Aerial w/ Topo Attached _____ Failure Report Completed