



Polk County Public Works
5885 NE 14th Street
Des Moines, IA 50313
(515) 286-3705

**ON-SITE WASTEWATER TREATMENT AND DISPOSAL SYSTEMS
CONTRACTOR'S LICENSE APPLICATION**

NO. _____

**NAME OF CERTIFIED
INSTALLER:** _____

ADDRESS: _____

CITY, STATE, ZIP: _____

COMPANY NAME: _____

PHONE NO.: _____ **FAX NO.:** _____

CELL PHONE: _____

E-MAIL ADDRESS _____

IOWWA or NEHA CERTIFICATION EXPIRATION DATE: _____

I have knowledge of Polk County rules and regulations pertaining to on-site waste water treatment and disposal systems and agree to follow the requirements set forth in those rules and regulations.

CHAPTER #3

Violation of any Polk County rules and regulations, on-site wastewater treatment and disposal systems may be subject to criminal and civil penalties - also suspension or revocation of contractor's license.

I have reviewed and understand the aforementioned requirements. I understand this is just an application and not a license. A license will be forthcoming upon approval of applicant.

LICENSE FEE: \$80.00

Make check payable to "Polk County Treasurer". Mail completed application form, remittance, and required documentation to:

Polk County Public Works Department
Attn: Phil Maloney
5885 NE 14th Street
Des Moines, IA 50313

APPLICANT SIGNATURE: _____ **DATE:** _____