



Luce County • 14150 Hamilton Lake Road, Newberry, MI 49868 • (906) 293-5107 • Fax (906) 293-5453
Mackinac County • 749 Hombach Street, St. Ignace, MI 49781 • (906) 643-1100 • Fax (906) 643-0239
Alger County • E9526 Prospect Street, Munising, MI 49862 • (906) 387-2297 • Fax (906) 387-2224
Schoolcraft County • 300 Walnut St., Room 155, Manistique, MI 49854 • (906) 341-6951 • Fax (906) 341-5230

WWW.LMASDHD.ORG

Facebook.com/lmasdhd

Sewage System Installer License Application

(Please type or print in ink. Complete all sections and sign on bottom of back page)

1) NAME:

First: _____ Last: _____ M.I. _____

2) ADDRESS:

Street/Box #: _____ City: _____

State: _____

3) CONTACT INFO:

Main #: () - _____ Cell #: () - _____

Fax #: () - _____ Email: _____

4) CURRENT EMPLOYER:

Business Name: _____

Business Address: _____ City: _____

State: _____ Zip: _____ County: _____

Business Phone #: () - _____ Business Fax #: () - _____

Number of Years Employed by Current Employer: _____

5) LIST ANY LICENSES OR REGISTRATIONS:

- 6) OTHER TRAINING & EDUCATION:** List any short courses, in-service training courses, extension courses, individual college courses, local health department trainings, MOWRA/NOWRA/MEHA training courses, etc. Note: Course must be related to waste water treatment or excavation. Please provide copies of any certifications received.

Course: _____ Location: _____ Date: _____

of Credits Obtained: _____

Remarks: _____

Course: _____ Location: _____ Date: _____

of Credits Obtained: _____

Remarks: _____

7) **PERSONAL REFERENCES:** (list 3 people with knowledge of applicant's abilities and work ethic).

1) Name: _____ phone #: _____

2) Name: _____ phone #: _____

3) Name: _____ phone #: _____

8) Provide at least **two reference statements or letters** – one completed by person who is considered a professional within the wastewater treatment/excavating industry such as a licensed sewage system installer, Registered Sanitarian, or professional engineer; and the second completed by another person who is familiar with the applicant's abilities. **These shall be different from those listed as personal references.**

9) **EQUIPMENT:** List equipment worked with &/or type of services conducted relating to experience:

10) **CERTIFICATE OF APPLICANT:**

I certify that all information provided in this application is true and complete

SIGNATURE

DATE