



Environmental Health Department

320 Third Street N.W. Suite 9 Faribault 507-332-6170

www.co.rice.mn.us

Operating Permit Application For HOLDING TANK

FOR OFFICE USE ONLY	
Date Received _____	Permit No. _____
Receipt # _____	Parcel Tax ID# _____

(Please Print)	Daytime Phone () _____	
_____	_____	
Applicant Name:	E-mail	
_____	_____	
Tank Site: Address	City	Zip Code
_____	_____	_____
Mailing Address: <i>(If different than above)</i>		

PLEASE SUBMIT THE REQUIRED ATTACHMENTS:

<input type="checkbox"/> Application Fee (\$125.00)	<input type="checkbox"/> Service Agreement signed by Owner/Licensed Maintainer (Pumper)
	<input type="checkbox"/> Signed Contract submitted previously
<input type="checkbox"/> Worksheet <i>(back of form)</i>	

I, hereby apply for an Operating Permit to operate a sewage Holding Tank system on the above described property and agree to operate such system in accordance with the regulations according to the Rice County Sewage and Wastewater Treatment Ordinance and the related standards of Rice County.

I, the undersigned, as owner or agent of the owner, of the above described property do hereby release Rice County and its employees from any and all liability and claims for damages to person or property in any manner or form that may accrue from the approval of a permit and operation or maintenance of the sewage Holding Tank System for which this permit application has been made.

Enclosed is the Operating permit fee: Make checks payable to Rice County Environmental Services.

Applicant's Signature _____ Date _____

Holding Tank Operating Permit Application Worksheet

(To be completed by homeowner)

Tank Pumper/Maintainer Business(s) : _____
Please print Company name(s)

- Must attach a copy of Pumping/Disposal Service Agreement signed by Owner & Licensed Maintenance Business or
- Signed Contract submitted previously

Approximate Number of People to utilize system: _____

Please identify plumbing fixtures present in the structure (circle all that apply)

Toilet Shower Bath sink Bathtub Kitchen sink Clothes washer Dishwasher

Other _____

Use of Property: Year Round Seasonal -- Days used per year _____

Is there a high level alert Alarm present and functioning? Yes No

I certify the above information is correct:

Worksheet Completed by:

Printed Name

Signature

Date: