



FIRST DISTRICT HEALTH UNIT

801 11TH AVE SW – PO BOX 1268

MINOT ND 58702-1268

PHONE (701)-852-1376 FAX (701)-852-5043



Public Health
Prevent. Promote. Protect.

SEWER CONTRACTOR LICENSE TO OPERATE APPLICATION

NAME OF BUSINESS		PREVIOUS LICENSE #	
NAME OF OWNER			
MAILING ADDRESS	CITY	STATE	ZIP CODE
PHONE NUMBER	MOBILE PHONE NUMBER		
FAX #	EMAIL ADDRESS		

IF THIS IS A CHANGE IN OWNERSHIP, PROVIDE THE FORMER BUSINESS NAME AND OWNER NAME BELOW:

SEND APPLICATION AND \$200.00 FEE TO:

FIRST DISTRICT HEALTH UNIT
ENVIRONMENTAL HEALTH DIVISION
801 11 AVE SW
MINOT ND 58701

SIGNATURE OF OWNER/MANAGER/APPLICANT

BY SIGNING ABOVE, YOU CERTIFY UNDERSTANDING OF THE FDHU
REGULATION NO. 10 DEALING WITH INDIVIDUAL SEWAGE TREATMENT
SYSTEM REQUIREMENTS FOR SEWAGE DISPOSAL SYSTEMS.

DATE

EHP APPROVAL