

## **Certification for Use or Abandonment of Existing Tank**

Onsite Sewage Disposal Systems

Submittal Date	Memo Number

SITE ADDRESS	INSTALLER INFORMATION	
Street Address	Installer Company	
City	tradellas Navas	
City	Installer Name	
Assessor's Account Number	Installer Contact Phone	
TANK CERTIFICATION		
Tank 1 – Certification for: Use	Comments	
Tank Type: Tank Size:		
Number of Compartments:		
Baffle(s) verified in good condition? Yes N/A		
Tank has been tested and certified as water tight on (date)		
Tank 2 – Certification for: Use Abandonment	Comments	
Tank Type: Tank Size:		
Number of Compartments: One Two		
Baffle(s) verified in good condition? Yes N/A		
Tank has been tested and certified as water tight on (date)		
ACKNOWLEDGMENT		
I certify that the information contained in this tank certification is true and accurate to the best of my knowledge; the tank has been tested to be water tight and in good working condition; and that water-tight risers have been installed to grade - or that the tank has abandoned per requirements of Kitsap Public Health District.		
Certified Installer Name Signature of certified individual Date		