

Fee: \$125.00

Richland County

SANITARY PERMIT - TRANSFER BETWEEN OWNER/REVISION (CHANGE OF PLUMBER)

Permit Transfer Date: _____ Original Permit Issue Date: _____ Expiration Date: _____
Previous State Plan ID Number: _____ New State Plan ID Number: _____ Office Permit Number: SP-_____
_____ 1/4 _____ 1/4, Section _____, T _____ N., R _____ E (or) W Town/Village/City of: _____
Lot _____ Block _____ Subdivision _____

Transfer Between Owners

PREVIOUS SANITARY PERMIT HOLDER:

Name: _____
Address: _____
City, State, Zip: _____

SANITARY PERMIT TRANSFERRED TO:

Name: _____
Address: _____
City, State, Zip: _____
Phone: _____

Previous Permit Holder Signature: _____

Revision (Change of Plumber)

*Revised plans must be submitted by installing plumber.

PREVIOUS PLUMBER:

Name: _____
Address: _____
City, State, Zip: _____

*INSTALLING PLUMBER:

Name: _____
Address: _____
City, State, Zip: _____
Phone: _____ MP/MPSRW#: _____

I, the undersigned, assume responsibility for installation of the private sewage system that has been previously approved for this property.

Installing Plumber Signature: _____

Issuing Agent Signature: _____ Date Approved: _____

RC-TRANSF(1-5-18)