



**APPLICATION FOR AN ON-SITE SEWAGE DISPOSAL SYSTEM LICENCE
DEPARTMENT OF PUBLIC SAFETY**

FOR NEW/RENEWAL OF CONVENTIONAL OR NON-CONVENTIONAL SYSTEM LICENCE

I hereby apply for a license to install, construct, repair and/or replace the following on-site sewage disposal system(s) in accordance with Section 23(1) of the *Public Health Act* and Sections 3 & 4 of *Regulation 2009-137*.

Please enter conventional system licence # if renewal : _____

Please enter non-conventional system licence # if renewal: _____

****Training and Exam: CONVENTIONAL and/or NON-CONVENTIONAL**

Attached is proof that I have completed the required training course(s) and passed the exam(s) of the license(s) for which I have applied.

	NEW (\$400 for Conventional, \$350 for each Non-conventional)	RENEWAL (\$50 each)	TOTAL
Conventional system (PLU 784000 - new) (PLU 784002 - renewal)	<input type="checkbox"/>	<input type="checkbox"/>	\$
**Non-conventional system – Contour (PLU 784003 - new) (PLU 784004 - renewal)	<input type="checkbox"/>	<input type="checkbox"/>	\$
**Non-conventional system – Fusion (PLU 784003 - new) (PLU 784004 - renewal)	<input type="checkbox"/>	<input type="checkbox"/>	\$
**Non-conventional system – Jet (PLU 784003 - new) (PLU 784004 - renewal)	<input type="checkbox"/>	<input type="checkbox"/>	\$
**Non-conventional system – Other (PLU 784003 - new) (PLU 784004 - renewal)	<input type="checkbox"/>	<input type="checkbox"/>	\$
Total Amount Owed:			\$

**PAYMENT - Return this completed form to a Service New Brunswick office along with the required fee.
Please note that there is a separate fee for each Non-Conventional Licence.**

Business Name		Corporation Number			
Applicant's Name			Email address		
Mailing Address				Postal Code	
Telephone Number		Cell Phone Number		Fax Number	

I hereby declare that I will abide fully by the requirements under *Regulation 2009-137* of the *Public Health Act* and the *New Brunswick Technical Guidelines for On-site Sewage Disposal Systems* respecting the design and installation, construction, repair and/or replacement of on-site sewage disposal systems.

Date : _____, 20____ Signature of applicant _____

FOR PUBLIC SAFETY OFFICE USE ONLY

Licence issued by

Chief Plumbing Inspector