



# Summit County Public Health

1867 West Market Street ♦ Akron, Ohio 44313-6901  
Phone: (330) 926-5600 ♦ Toll-free: 1 (877) 687-0002 ♦ Fax: (330) 923-6436  
www.scph.org

## 2025 Application for Sewage Treatment System (STS)

### Homeowner Registration

Applicant Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

#### What registration(s) are you applying for?

\_\_\_ Installer \$160.00  
\_\_\_ Service Provider No Fee  
\_\_\_ Septage Hauler No Fee

#### Amount Due:

\_\_\_\_\_ .00

\*Please note: If approved, homeowner registration allows the applicant to perform work ONLY at their personal residence

Address where work will be performed: \_\_\_\_\_

STS type to be installed / serviced: \_\_\_\_\_

**The following documentation is required and must be submitted with this application, as applicable. If these are not completed or included with your application, as applicable, your application will not be reviewed.**

- \_\_\_ Copy of State STS Exam Certificate
- \_\_\_ For service providers: copies of any and all applicable manufacturer/distributor certifications
- \_\_\_ For septage haulers: copies of truck inspections for 2025 registration
- \_\_\_ For septage haulers: truck information, as well as the method for and location of disposal

### IMPORTANT: Please Read Carefully!

By signing this application for registration, I agree to comply with the OAC 3701-29, the Environmental Health Code of the Summit County Public Health (SCPH) as well as all STS Operation and Maintenance rules and procedures adopted by SCPH. I certify that all information and documentation submitted is true and complete to the best of my knowledge.

- I understand that this registration allows me to work only on the STS at my personal residence
- I understand that my registration expires December 31<sup>st</sup> of this year and I am required to register each year that I intend to service my own STS

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Submit this completed application and all of the applicable required documents to the address listed above. You will be notified of approval status and receive your registration certificate once this application has been approved. Incomplete applications will be returned unapproved. Registration approval is not granted upon submission of this application. You may not commence work as a septage hauler, installer or service provider until you are an approved and registered contractor.**

Date Received: \_\_\_\_\_

Registration: \_\_\_ Approved \_\_\_ Denied

Reviewed by: \_\_\_\_\_

Total Registration Fees Due: \$ \_\_\_\_\_ .00

Amount Paid: \$ \_\_\_\_\_ .00

Cash ☐

Check ☐

Check #: \_\_\_\_\_

Received by: \_\_\_\_\_