

KNOX PUBLIC HEALTH

11660 Upper Gilchrist Rd.
Mount Vernon, OH 43050

www.knoxhealth.com

Phone 740-392-2200
Fax 740-392-9613

2023 Registration Application For Service Provider Registration Fee \$125

I, _____ hereby apply for registration to be a Service
(Name)
Provider in the Knox County General Health District.

Business Name: _____

Name of Operator: _____

Address: _____

City, State, Zip: _____

Phone: _____ Cell phone: _____ Fax: _____

e-mail: _____

Bond Company: _____ Bond Expiration: _____

I am also registered in the following counties: _____

I agree to comply with Ohio Administrative Code Chapter 3701- 29, Sewage Treatment System rules which serves as the governing rules for Service Providers in the Knox County General Health District.

Signature: _____ Date: _____

OFFICE USE ONLY

ODH Approved Bond Attached CEU's Attached Insurance

Test Date: _____ Score: _____

Registration Approved: _____ Registration Denied: _____

Date: _____ Receipt #: _____ Registration Number: _____