



JOHNSTON COUNTY ENVIRONMENTAL HEALTH DEPARTMENT

309 East Market Street, Smithfield, NC 27577

Phone: 919-989-5180

Fax: 919-989-5190

Email: septicwellapplication@johnstonnc.com

REGISTRATION FOR GROUND ABSORPTION SYSTEMS COMPANY

1. Name of applicant, Firm, Partnership: _____
2. Business Address: _____ Business Phone: _____
3. Responsible Person: _____ Mobile Phone: _____
4. Email Address _____
5. Check (1) of the following: New Renewal No longer in business
6. Type of equipment used in construction:
 - A. _____
 - B. _____
 - C. _____
7. Other licenses which you currently display (i.e., contractors, general, issued either by State of N.C. or local)
 - A. _____ B. _____
 - C. _____ D. _____
8. List the counties which you presently hold registration in:
 - A. _____ B. _____
 - C. _____ D. _____
9. State Certification #: _____
10. Type of Classification: _____
11. Certificates from accepted or innovative systems, please enclose _____ copies.

Signature: _____ Date: _____

FOR DEPARTMENT USE ONLY

Registration Number (_____) Date: _____