

ENVIRONMENTAL HEALTH DIVISION

2700 M Street, Suite 300, Bakersfield, CA 93301

Phone # (661) 862-8740 Fax (661) 862-8701

Email EH@KernCounty.com

SEPTIC SYSTEM EXEMPTION REQUEST

OWTS Permit #:		Lot Size:		BID Permit #:	
Type of Work:	<input type="checkbox"/> New Construction/ Replace Existing	<input type="checkbox"/> Expand/Repair*		<input type="checkbox"/> Remove/Replace Tank	
Type of System:	<input type="checkbox"/> Residential	<input type="checkbox"/> Commercial	<input type="checkbox"/> Engineered	<input type="checkbox"/> Alternative	

Description of work to be done:

Request for variance:

Reason for variance:

Document(s) provided:

Submitted By: _____ Date: _____

***Please attach any necessary documents that will help obtain an approval for the Exemption Request.
Thank you.***

FOR OFFICE USE ONLY

REQUEST APPROVED

REQUEST DENIED

Reason For Denial: _____

Required Alternative: _____

Signed By: _____ Date: _____