

STATE OF CALIFORNIA
APPLICATION
FOR
DOMESTIC WATER SUPPLY PERMIT
FROM

Applicant: _____
(Enter the name of legal owner, person(s) or organization)

Address: _____

System Name: _____

System Number: _____

TO: San Diego County Department of Environmental
Health and Quality
LWQD, Small Drinking Water Systems Program
5500 Overland Avenue, Suite 210
San Diego, CA 92123



Pursuant and subject to the requirements of the California Health and Safety Code, Division 104, Part 12, Chapter 4 (California Safe Drinking Water Act), Article 7, Section 116525, relating to domestic water supply permits, application is hereby made for a domestic water supply permit to operate _____
(Applicant should state the type of system, e.g., community,

transient-noncommunity, or nontransient-noncommunity, and the proposed area of services. This application will also be used

for a change in ownership application.

FOR OFFICIAL USE

Date Received:

I (We) declare under penalty of perjury that the statements on this application and on the accompanying attachments are correct to my (our) knowledge and that I (we) are acting under authority and direction of the responsible legal entity under whose name this application is made.

Signed By: _____

Title: _____

Address: _____

Telephone: _____

Dated: _____