

**ON-SITE SEWAGE DISPOSAL "AS-BUILT" PLOT PLAN**

(To be provided to system installer for submittal to Placer County Environmental Health at job completion)

Owner Name: \_\_\_\_\_ APN: \_\_\_\_\_

Job Location: \_\_\_\_\_ Scale: \_\_\_\_\_

Company Name/Address: \_\_\_\_\_

Installer Name Printed: \_\_\_\_\_

Installer Signature: \_\_\_\_\_ Date Completed: \_\_\_\_\_

<u>For Office Use Only</u>		
As-Built Approved: _____	By: _____	Permit#: _____