

Onsite Wastewater Treatment System Professionals Voluntary Registration Form

Check Appropriate Box

New:

Revision:

Date: _____

Requested Registration Categories:

Septic System Enforcement Officer:

Septic System Installer:

Site Evaluator:

Septic System Inspector:

Septic System Designer:

Fields in **BOLD** are required

Name: _____

Professional Affiliations/

Licenses/Registrations/

Certifications:

(Ex. N.J.P.E., Home Inspector,

NSF, NJSMA, R.E.H.S., etc.)

Company: _____

Address: _____

Telephone: _____

Fax: _____

E-mail*: _____

Years of Experience: _____

Additional Information:

(Ex. Alternate phone #,

e-mail contact or comments)

Company _____

Website: _____

*An email address is required if you wish to receive regular updates regarding the onsite wastewater management program from the NJDEP. E-mail addresses listed here will not be published as public information.

Information provided on this form will be used to disseminate information from the Department to the community of onsite wastewater treatment system professionals as well as providing a list of registered professionals as public information. This information will be made available through the Department's website under the topic Onsite Septic Systems at www.state.nj.us/dep/dwq. New or revised forms should be sent to: New Jersey Department of Environmental Protection; Bureau of Nonpoint Pollution Control; P.O. Box 029; Trenton, New Jersey 08625-0029; Attn: Onsite Voluntary Registration. The information can also be faxed to (609) 984-2147 or e-mailed to CH199@dep.state.nj.us.

Please check this box if you do NOT wish to have any of your information posted to our website.