

Environmental Health Services Division

401 Fifth Avenue, Suite 1100
Seattle, WA 98104

206-263-9566 Fax 206-296-0189
TTY Relay: 711

www.kingcounty.gov/health

INSTALLERS BACKFILL NOTIFICATION - REQUEST FOR FINAL INSPECTION

TO: _____
(Designer)

Name of owner: _____

Site address: _____
As it appears on installation permit

Installation
Permit Number: _____

I, _____
(Signature of Master/Associate Installer), was present at this site placing or supervising
placement of final cover on the date indicated (please check appropriate box).

Date backfilled: _____
_____ Placement of final cover

Instructions:

Certified Installer:

1. You must place or be physically present on the site to supervise placement of final cover material on the sewage disposal system;
2. This form may be used to certify that you have placed or supervised final cover placement (or you may use the designated space at the bottom of the installation permit) and to notify the designer that system is ready for final inspection;
3. Routing instructions: upon completion, this form is to be forwarded to the designer.

Certified Designer:

Following your final cover inspection, please attach this form to the permit and as-built certification form and forward to the district office.