



Office of Public Health – Onsite Wastewater Program
(<http://www.privatewaterandsewage.dhh.louisiana.gov>)

Installer License Checklist

SUBMIT THE REQUIRED ITEMS LISTED BELOW ALONG WITH THIS CHECKLIST

Important: You are responsible for the accuracy of your applications and accompanying documentation. The accuracy of your documents affects the processing time. Your legal first and last names **MUST appear the same on **ALL** documents (Double check the spelling of your name). Do not make any changes to the endorsement(s) and/or insurance documents. If changes are needed on the proof of insurance, then contact the insurance company.**

_____ A **completed** and **signed** License Application form. **All fields and signatures are mandatory.** IF YOU PROVIDE AN EMAIL ADDRESS, IT WILL BE THE METHOD USED TO CONTACT YOU.

_____ A **completed** and **signed** Affidavit. **All fields and signatures are mandatory.**

_____ **Original** endorsement(s) from a licensed manufacturer(s) for the brand(s) of individual mechanical plant to be installed and/or maintained, **signed if required.**

- Note: At least one original endorsement is needed to apply for a Combination License. Endorsements for Combination Licenses must state install and maintain a specific individual mechanical plant.
- For endorsements which state maintenance/service only, a Maintenance License must be acquired.

_____ Proof of insurance in the form of a certificate of insurance (COI), or the declaration, that provides the name of the installer and the Certificate Holder information as follows: LDH-OPH, Onsite Wastewater Program Bin 10 Box 11, P. O. Box 4489, Baton Rouge, LA 70821. The policy shall indicate minimum coverage limits of at least \$100,000 each occurrence/\$300,000 **aggregate per person.**

NOTE: Your policy must have your name on it as we do not issue installer licenses to companies.

_____ Check or money order, payable to LDH/OPH for \$150.00 per license type.

If applying for all three licenses (basic, combination and maintenance), your total fees are \$450.00.

Also, if your training has expired, please contact LDH at (225) 219-0179 to enroll in the next available class. Training is required once every five years.

PLEASE NOTE: All application materials for license renewals are due by December 1st every year. Fees will not be processed until January for current installers and on or after February 1st for new installers. LATE FEES in the amount of 10% of the licensing fees will be assessed if all materials for licensure have not been postmarked by December 31st. ALL late application materials are subject to being reviewed when time is allowed which can result in the installer becoming inactive once the new licensing period begins on February 1st.

Any application materials postmarked later than March 3rd will result in the applicant being assessed a fine of 100% of the cost of licensure. LATE FEES must be paid by a separate check or money order. License renewal application packets will not be processed if LATE FEES are due and the applicant fails to submit the applicable LATE FEES IN FULL (authorized by L.R.S. 40:6.E).



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The Basic License is required for the installation and maintenance of septic tanks/field lines, septic tanks/oxidation ponds, septic tanks/sand filters, and limited use systems.

The Combination License is required for the installation and maintenance of individual mechanical treatment plants. This license may be obtained only in conjunction with a basic license, and is considered to be a separate license.

The Maintenance License is required for the servicing and maintaining of individual mechanical treatment plants when the manufacturer endorsement specifies **maintenance only**.

(As per Title 51, Part 13, Subchapter C, §735, B, 2).

Licenses expire on January 31 of each year.

Rev. 06/2025

Check Applicable Boxes: ☐ New Application ☐ Renewal Application ☐ Update Information
Type of Licenses: ☐ Basic License ☐ Combination License ☐ Maintenance License

Please print in ink or type.

Applicant Legal Name: _____	
Address: _____	City/State/Zip Code: _____
Home Phone/Area Code: _____	Email Address: _____
Installer's License Number(s): _____	
Company Name: _____	
Mailing Address: _____	City/State/Zip Code: _____
Business Phone/Area Code: _____	Parish/County: _____
Date of Last Installer's Training Class: _____	
Signature of Applicant: _____	Date: _____
(Applicant's name must be the same on ALL documents. Also, any incomplete application(s) will not be processed.)	

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Mail completed applications and required documents to: LDH-OPH Onsite Wastewater Program,
P. O. Box 4489, Bin 10, Box 11, Baton Rouge, LA 70821-4489.

FOR OFFICE USE ONLY

Status: _____ RTP _____ PENDING _____ DNR	Logged in by: _____ Date: _____
Pending reason(s): _____ _____ _____	M.O. or Check #: _____ Late Fee M.O./Check #: _____
	DHD #: _____ Processed By: _____



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AFFIDAVIT

This affidavit must be submitted when applying for a basic, combination, maintenance, and /or homeowner license(s).
Only one affidavit is needed per applicant if applying for multiple licenses.
Licenses and endorsements expires January 31 of each year.

IF-81706

Rev. 7/1/2019

Date: _____

STATE OF LOUISIANA

PARISH OF _____

BEFORE ME, on this _____ day of _____, the undersigned notary public, commissioned in and qualified for the Parish and State aforesaid, and the two undersigned competent witnesses, personally came and appeared:

Licensee: _____
Please Print Name

who, after being duly sworn, did depose and say:

I hereby certify that I have obtained, read, understand and shall comply with the following provisions of the Sanitary Code (Title 51): Part XIII.; Part XII. Water Supplies. Chapter 3. §327 Ground Water Supplies, specifying the requirements for minimum distance to sources of contamination; applicable sections of Part XIV, including Chapter 6. §613. Water Service Pipe and Fittings. C. through J.; and, applicable sections of Part XIV. Chapter 7. Sanitary Drainage and, I will make installations and/or provide maintenance in compliance therewith. I also certify that I am trained in the proper installation of all components, which I intend to maintain in the State of Louisiana for the duration of this license. Furthermore, I understand that under provisions in Title 51, Part XIII., Subchapter C., §735.F.,G., licenses may be suspended or revoked by the agency for non-compliance with code provisions, and that licenses which are revoked are not eligible for reinstatement for a minimum period of two years.

Notary Public
Witnesses:

Licensee Signature

1st Witness Please Print Name

1st Witness Signature

2nd Witness Please Print Name

2nd Witness Signature

Mail to:

**LDH-Office of Public Health
Onsite Wastewater Program
P. O. Box 4489, Bin 10, Box 11
Baton Rouge, LA 70821-4489**