



Well and Onsite Sewage Disposal Land Use Clearance

DEPARTMENT OF PLANNING AND BUILDING SERVICES

707 Nevada Street, Suite 5 • Susanville, CA 96130-3912

(530) 251-8269 • (530) 251-8373 (fax)

www.co.lassen.ca.us

Form must be typed or printed clearly in black or blue ink. All applicable sections must be completed in full.

Only attach additional sheets if necessary.

The Planning and Building Services Department and the Environmental Health Department must both approve all permits for onsite sewage disposal or any type of well application. Completion and approval of this form is the first step toward issuance of a permit. Instructions for the completion of this form and instructions for the processing of any well or onsite sewage disposal application can be found on the associated process form.

Property Owner/s	Agent (Contractor/Engineer) or Applicant
Name:	Name:
Mailing Address:	Mailing Address:
City, ST, Zip:	City, ST, Zip:
Telephone: Fax:	Telephone: Fax:
Email:	Email:

Deed Reference: Book: Page: Year: Doc#:	
Physical Address:	Assessor Parcel Number(s):
Type of application being sought: <input type="checkbox"/> Well <input type="checkbox"/> Septic <input type="checkbox"/> Other:	Type of use: <input type="checkbox"/> Residential <input type="checkbox"/> Agricultural <input type="checkbox"/> Monitoring <input type="checkbox"/> Other:

LASSEN COUNTY PLANNING AND BUILDING SERVICES DEPARTMENT STAFF USE ONLY:

- ☐ Zoning District: _____
- ☐ Flood Plain Information: _____
- ☐ Plot Plan Adequate (or waived until approval by Environmental Health and issuance of a permit)
- ☐ Incremental Development Proposed: ☐ Yes ☐ No Details: _____
- ☐ Parcel Size (acreage): _____
- ☐ Parcel Map/Subdivision Map: exclusion areas, designated leach field areas, etc. (attach Map if pertinent) _____
- ☐ Required Setbacks (if any portion located more than twelve inches above grade): _____
- ☐ Legal parcel per Subdivision Map Act section 66499.34 and County Code section 12.24.025: ☐ Yes ☐ No
Details: _____
- ☐ Other (easements, etc.) _____

Based on the above information, the applicant/property owner/contractor is eligible to submit an application for the use identified herein to the Environmental Health Department:

Signature of Authorized Official: _____ Date: _____

Print Name: _____