



8.  Existing system approval
- Non-expanding; not detailed evaluation
  - Non-expanding, detailed evaluation
  - Expanding, not detailed evaluation
  - Expanding, detailed evaluation
9.  Construction documents:
- Filtration or other complex treatment
  - Chemical addition only
  - Complete new water system
  - New source only
  - System modification
  - System modification; design standards used; PE prepared

10.  Waivers:
- Use
  - Use (renewal)
  - Coliform (w/departmental inspection)
  - Coliform (w/third-party inspection)

11.  Other
- Well-site evaluation and approval
  - Regulatory monitoring plan
  - Unfiltered system annual report
  - Water system compliance report (loan letter)
  - Water right self-assessment (if applicable)

12. Other projects (describe)

***Please return completed form to the Office of Drinking Water regional office checked below.***

Northwest Drinking Water  
 Department of Health  
 20425 72<sup>nd</sup> Ave S, Suite 310  
 Kent, WA 98032-2388  
 Phone: 253-395-6750  
 Fax: 253-395-6760

Southwest Drinking Water  
 Department of Health  
 PO Box 47823  
 Olympia, WA 98504-7823  
 Phone: 360-236-3030  
 Fax: 360-664-8058

Eastern Drinking Water  
 Department of Health  
 16201 E Indiana Ave, Suite 1500  
 Spokane Valley, WA 99216  
 Phone: 509-329-2100  
 Fax: 509-329-2104

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For Department use only.

ODW Project # \_\_\_\_\_; Initial fee Amount \$ \_\_\_\_\_; Date invoice mailed: \_\_\_\_\_;

Invoice # \_\_\_\_\_; Fee received: \_\_\_\_\_; Review letters sent: \_\_\_\_\_

Approval Date: \_\_\_\_\_ Date construction report received: \_\_\_\_\_ # approved connections \_\_\_\_\_

Area served: \_\_\_\_\_

Provisions: \_\_\_\_\_

For people with disabilities, this document is available on request in other formats. To submit a request, please call 1-800-525-0127 (TDD/TTY call 711).