



**Pitkin County Environmental Health Department  
Onsite Wastewater Treatment System (OWTS)  
USE PERMIT APPLICATION**

76 Service Center Rd  
Aspen, CO 81611  
Website: [www.aspenpitkin.com/ehnr/](http://www.aspenpitkin.com/ehnr/)

**Application for Continued Use of an Existing OWTS**

Parcel ID# (available from the Pitkin County Assessor's Office  
970-920-5160 or at [www.pitkinassessor.org](http://www.pitkinassessor.org)):

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Purpose of Use Permit:  PROPERTY TRANSACTION  REMODEL/ADDITION

Property Address:

Lot: Block: Filing: Subdivision:

Residences: Other  
# of Bedrooms: fixtures/uses:

Property Owner(s)\*: Email Address:

Owner's Mailing Address: City, State, Zip:

Home Phone: Business Phone:

*\*Contact information must be provided for the owner signing this application.*

Primary Contact Person/Applicant (if not owner): Company:

Contact/Applicant Mailing Address: City, State, Zip:

Cell Phone: Business Phone:

Fax Number: Email Address:

Indicate Preferred Method of Permit Receipt:  Email  Fax  US Mail

Licensed Systems Inspector: Phone Number: Email Address: Fax Number:

Mailing Address: City, State, Zip:

**PLEASE READ BEFORE SIGNING:**

I certify that the above information is complete and accurate and that I have provided complete and accurate information in all of the documents included in my application package. I acknowledge that this department may revoke any permit I am issued if my application is found to contain any inaccurate, false, or misleading information.

Owner Signature (Required): Date:

Applicant Signature: Date:

*Please allow 3-5 business days for processing of Use Permits.*

**FOR OFFICE USE ONLY**

Received by EH Staff: Fee & Receipt #: Date:

