

# CHATHAM HEALTH DISTRICT

*Serving the Towns of East Haddam, East Hampton, Haddam, Hebron, Marlborough & Portland*

BOARD MEMBERS

Susan S. Bransfield, *Chairman*  
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Candace Casale  
Jared Clark

DISTRICT HEALTH DIRECTOR

Thad D. King, MPH RS

## Licensed Cleaner Registration

Date \_\_\_\_\_  
Company Name \_\_\_\_\_  
Owner \_\_\_\_\_  
Street \_\_\_\_\_  
Town \_\_\_\_\_  
Zip \_\_\_\_\_  
Phone \_\_\_\_\_  
Fax \_\_\_\_\_  
Website \_\_\_\_\_

Last Name                      First Name                      CT License                      Expiration                      Signature

Last Name	First Name	CT License	Expiration	Signature

By signing this registration, I acknowledge that I have read the Wastewater Pumping and Permit to Discharge Regulation as approved by the Chatham Health District, Board of Health, and understand the requirements and responsibilities therein.