



Registration Form Site Suitability Assessment

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SSA Registration # _____ **62**

Site Suitability Assessment

Date submitted _____

Site Assessor Information	
Site Assessor's Name:	License #:
Company Name:	Phone #:

Property Information	
Owner's Name:	
Property #:	Community:
Lot #:	New Development: Yes <input type="checkbox"/> No <input type="checkbox"/>

Applicant Information	
Name:	
Address:	
Community	Postal Code

Assessment Results

Category				
I	II	III	IV	V
(circle one)				

Depth of permeable soil _____

Signature of Site Assessor

