

**STATE OF CALIFORNIA**  
APPLICATION  
FOR  
DOMESTIC WATER SUPPLY PERMIT AMENDMENT  
FROM

Applicant: \_\_\_\_\_  
(Enter the name of legal owner, person(s) or organization)

Address: \_\_\_\_\_

System Name: \_\_\_\_\_

System Number: \_\_\_\_\_



TO: **Department of Community Services**  
**Environmental Health Division, Local Primacy Agency**  
**292 West Beamer Street, Woodland, CA 95695**

**E-mail : [environmental.health@yolocounty.org](mailto:environmental.health@yolocounty.org)**

**Phone : (530)-666-8646 ; Fax : (530)-669-1448**

Pursuant and subject to the requirements of the California Health and Safety Code, Division 104, Part 12, Chapter 4 (California Safe Drinking Water Act), Article 7, Section 116550, relating to changes requiring an amended permit, application is hereby made to amend an existing water supply permit to \_\_\_\_\_

(Applicant must state specifically what is being applied for - whether to construct

new works, make alterations or additions in works or sources, or change or modify treatment.)

FOR OFFICIAL USE

Date Received:

I (We) declare under penalty of perjury that the statements on this application and on the accompanying attachments are correct to my (our) knowledge and that I (we) are acting under authority and direction of the responsible legal entity under whose name this application is made.

Signed By: \_\_\_\_\_

Title: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

Dated: \_\_\_\_\_