



BERKELEY COUNTY HEALTH DEPARTMENT

122 Waverly Court
Martinsburg, West Virginia 25403
304-267-7130

I give my permission for the Berkeley County Health Department to change the licensed septic installer for permit # _____

From _____
(Name of Septic Installer)

To _____
(Name of Septic Installer)

Installer's signature (required): _____

I give my permission for the Berkeley County Health Department to change the licensed well driller for permit # _____

From _____
(Name of Well Driller)

To _____
(Name of Well Driller)

Well Driller's signature (required): _____

Permit Holder/Owner

Date