Bernalillo County Office of Environmental Health 111 Union Square SE, Suite 300 Albuquerque, NM 87102 Phone (505) 314-0310 Fax (505) 314-0470



Permit No. EHVA
Receipt Number Fee \$50.00 Application CompleteYesNo
Reviewed by
Date

Wastewater Variance Application

n				
Property Owner Name		Phone Number		
_			Zip Code	
Applicant Name	Authorization Statement Include Phone Number		Authorization Statement Included	
Mailing Address				
City		State	Zip Code	
Email		Fax Number		
Location Site Address				
Site Address				
			Designation	
Variance of Code Section of Ordinance 2006-1 for which a variance is requested:				
☐ Proof of neighboring property owner notification attached				
Please check which type of sewage disposal that exists as of the date of this application:				
☐ Onsite Wastewater System	☐ Community Wastewater System			
☐ Sewer	□ None			
		1,0110		
Source of Water ☐ Individual or Shared Well	Well Permit Number			
☐ Public Water Supply	System Name & Acct.	#		
☐ Hauled Water	Water Source Name			
Briefly describe the alternative method or means of complying with the specific requirement in the Ordinance				

Please continue to page 2

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Describe how the proposed method will comply with the intent of the s	specific requirement in the code
This application must be accompanied by the following:	
 Proof of neighbor notification A copy of the Zone Atlas page with the property identified 	
Any other supporting documentation	
The foregoing information and the attached documentation are true and correct to the be loes not relieve me from the responsibility of complying with all regulations. Obtaining obtaining any permits required by State, County, or City regulations or ordinances or other controls.	the permit does not relieve me from the responsibility of
Property Owner's Name	Date
Property Owner's Signature	
Authorized Representative's Name	Date
Authorized Representative's Signature	