

**PUTNAM COUNTY DEPARTMENT OF HEALTH
DIVISION OF ENVIRONMENTAL HEALTH SERVICES**

LETTER OF AUTHORIZATION

RE: Property of _____

Located at _____

T/V _____ Tax Map # _____

Subdivision of _____

Subdivision Lot # _____ Filed Map # _____ Date Filed _____

To whom it may concern:

This letter is to authorize _____

A duly licensed Professional Engineer _____ or Registered Architect _____ to apply for the required wastewater treatment and/or water supply permits(s) to serve the above-noted property in accordance with the standards, rules or regulations as promulgated by the Commissioner of Health of the Putnam County Department of Health, and to sign all necessary papers on my behalf in connection with this matter and to supervise the construction of said wastewater treatment and/or water supply systems in conformity with the provisions of Article 145 and/or 147 of the Education Law, the Public Health Law, and the Putnam County Sanitary Code.

Countersigned: _____
(Design professional)

Signed: _____
(Owner of property)

(Print name)

(Print name)

P.E., R.A., # _____

Mailing Address: _____

Mailing Address: _____

State _____ Zip _____

State _____ Zip _____
Telephone: _____

Telephone: _____

Date: _____

Email: _____