



City of Malibu

23815 Stuart Ranch Road · Malibu, California · 90265-4861
Phone (310) 456-2489 · Fax (310) 456-3356 · www.malibucity.org

OPERATING PERMIT APPLICATION

Site Address: _____

APN: _____

Owner Name: _____

Owner Mailing Address: _____

Owner Phone/Email: _____

Application Type: Initial Renewal Point of Sale Change of Owner

Number of OWTS on subject property: One Two Three Four

Type of OWTS: Conventional Advanced Alternative

Note: All non-conventional system must complete the section below

Type of Occupancy served by the OWTS:

Residential (Single Family)

Multifamily (Triplex or greater, condos, apt.)

Commercial

Waste Discharge Permit: (Issued by the Los Angeles Regional Water Quality Control Board)

Yes WDR Number: _____ Expiration Date: _____

No

ALTERNATIVE/ADVANCED/DEMONSTRATION SYSTEMS INFORMATION:

System Manufacturer: _____

Model Name/Number: _____

Maintenance Provider: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone Number: _____

Email Address: _____

Contract Expiration Date: _____

Do not write below – City use only

Permit Fee Paid Date: _____ By: _____