



# City of Malibu

23825 Stuart Ranch Road · Malibu, California · 90265-4861  
Phone (310) 456-2489 · Fax (310) 456-3356 · [www.malibucity.org](http://www.malibucity.org)

## OWTS PRACTITIONER ADDRESS FORM

All Onsite Wastewater Treatment System Registered Practitioners are required to file and maintain a current mailing address with the City. By signing this form, you agree that all correspondence and notices the City may elect to send to you may be sent to the stated addresses. Any change of addresses or other information indicated on this form must be provided to the City within 3 business days of the change. A completed copy of this form must be provided to the City with each initial "Application for Onsite Wastewater Treatment System Practitioner Registration" and with each renewal application.

### Practitioner Discipline:

INSTALLER  DESIGNER  OPERATION & MAINTENANCE  INSPECTOR

### Address Information:

#### Practitioner:

\_\_\_\_\_  
Last Name

\_\_\_\_\_  
First Name

\_\_\_\_\_  
Middle Initial

\_\_\_\_\_  
Mailing Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip Code

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Email Address

#### Company:

\_\_\_\_\_  
Company Name

\_\_\_\_\_  
Company Owner Name

\_\_\_\_\_  
Mailing Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip Code

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Email Address