



DEPARTMENT OF ENVIRONMENTAL HEALTH

633 WASHINGTON STREET, ROOM

36

RED BLUFF, CA 96080

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Tia Branton, REHS
Director

Timothy Peters
Health Officer

SERVICE REQUEST

APN# _____

SERVICE:	FEE:	AMOUNT:	RECEIPT:
• Land Division	\$105.00 Initial		
1. TPM# _____ Lots _____	\$105.00 EA.	\$ _____	# _____
2. Tract Map# _____ Lots _____	\$105.00 EA.	\$ _____	# _____
• Soil Profile Investigation (SPI)	\$210.00 EA.	\$ _____	# _____
• Oil & Gas Well Use Permits	\$428.00 EA.	\$ _____	# _____
• Setback Adjustment	\$143.00	\$ _____	# _____
• Lot Line Adjustment (site review only)	\$267.00	\$ _____	# _____
• Other: _____			
• Received by: _____		Date: _____	

OWNER'S
NAME: _____

MAILING ADDRESS: _____

CONTRACTOR NAME: _____

PROPERTY ADDRESS: _____

PHONE: _____ EMAIL: _____

SIGNATURE: _____ DATE: _____