Forsyth County Environmental Health

514 West Maple St, Suite 404 • Cumming, Georgia 30040
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District 2, Public Health

TEMPORARY TOILET APPLICATION

($100.00 per unit)

Permit/Business Name:_____

Mailing Address:_____

Phone Number: _____

Subdivision:_____ Lot#:_____

Temporary Toilet Location Address:_____

City:_____ Zip:_____

Application Date: _____

Construction Type: Individual New Home ☐ Sales Trailer ☐ Festival ☐ Modification / Addition ☐

Other ☐

Additional location(s) to be covered by this temporary toilet:

Address Lot #

_____

_____

_____

_____

_____

Service Provider of Toilet:_____ Phone #:_____

*** - Movement of Temporary Toilet voids permit.**
*** - Facilities must be serviced no less than bi-weekly.**
*** - Each construction site must have a Temporary Toilet located within 200 feet of the building's foundation.**
*** - The maximum acceptable "Worker to Temporary Toilet" ratio is 20 to 1.**
*** - Permits are valid for 12 months from date of issue.**
*** - Permits are non-transferable.**

Temporary Facility type: Construction Trailer ☐ Port-a-Jon ☐ Other (specify) ☐

Applicant Name: _____ Phone #: _____

Applicant Signature _____

Construction Start Date: _____