



Park County Environmental Health

414 E. Callender

Livingston, MT 59047

406-222-4145 or 406-222-4142

Fax 406-222-4109

Site Evaluator License Application

Date _____

Name _____

Address _____

City, State, Zip _____

Email _____

Phone number _____ Cell phone _____

Professional engineer or Registered Sanitarian license number _____

If you need to take the class, check here _____

Licenses are good January 1-December 31 of each calendar year. A renewal letter will be sent out, but it is your responsibility to renew your license **BEFORE** January 31 of each year.

Office use only:

Date rec'd _____

Paid _____

Check number _____