



**Public Health**  
Prevent. Promote. Protect.

# Forsyth County Environmental Health

514 West Maple St, Suite 404 • Cumming, Georgia 30040  
PH: 770-781-6909 • FAX: 678-807-7343 • [www.forsythhd.com](http://www.forsythhd.com)  
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: \_\_\_\_\_