Virginia Department of Health
Petition for VDH Services Form

I, _____, am petitioning VDH to provide evaluation and design services based on (select one):

☐ Means test (household income at or below 100% of the federal poverty guidelines)

Persons in Household	200% Federal Poverty Guidelines
1	$14,580
2	$19,720
3	$24,860
4	$30,000
5	$35,140
6	$40,280
7	$45,420
8	$50,560

☐ VDH Hardship Guidelines

If you selected VDH Hardship Guidelines, please check all of the following guidelines that apply:

☐ Qualify for fee waiver pursuant to 12VAC5-620-80.A.

☐ Replacement well.

☐ Well abandonment.

☐ Safe, Adequate, and Proper Evaluation.

☐ Onsite sewage system repair or pit privy fee waiver.

☐ Insufficient number of private sector service providers.

☐ Other: If other, please provide a detailed description of your hardship in obtaining private sector evaluation and design services along with any relevant documents that you believe supports your request. Please provide the names of private sector service providers you contacted, prior to submitting this petition. (Detailed description can be attached)

_____
_____
_____
_____
_____
_____
_____
_____

_____ _____
Owners/Agents Signature Date

(Office Use Only) Petition for services ☐ Approved ☐ Denied

Reviewed by _____ _____
Date