



LIQUID WASTE HAULER PERMIT APPLICATION

| RETU | URN APPLICATION BY: | | | | | |
|------|--|---------------------|------------------------------|--|--|--|
| PLEA | ASE COMPLETE ALL APPLICABLE ITE | MS OR YOUR APPLICAT | TION WILL BE RETURNED. | | | |
| | New Permit Application | | | | | |
| | Permit Renewal (Current Permit No.): | | | | | |
| | Change of Vehicle Ownership (Previous Permit No.): | | | | | |
| 1. | Name of Company: | | | | | |
| 2. | Name of Owner: | | | | | |
| 3. | Business Address: Number and Street: | | | | | |
| | City: | State: | Zip: | | | |
| 4. | Mailing Address: Number and Street: | | | | | |
| | City: | State: | Zip: | | | |
| 5. | Phone No.: () | Fax_ | No.:() | | | |
| 6. | Vehicle Insurance Company: | | | | | |
| | Address: | | Phone No.: | | | |
| | City: | State: | Zip: | | | |
| 7. | Bonding Company (if applicable): | | | | | |
| | Address: | | Phone No.: | | | |
| | City: | State: | Zip: | | | |
| 9. | City of Riverside Business Tax Certificate No.: | | Expiration Date [.] | | | |

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| 10. | Pumping Vehicle Information: List each truck and/or trailer owned and operated by your |
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| | company which will dispose of liquid septic waste to the City of Riverside's Regional Water |
| | Quality Control Plant (RWQCP). |

| Vehicle Make | Year | Vehicle License No. | Tanker License No. (If applicable) | Tank Capacity | Current Year County Decal No. (required) | Decal Expiration Date |
|--------------|------|------------------------|------------------------------------|------------------|--|-----------------------------|
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"I certify under penalty of law that all information furnished is true and correct, and that I, my agents and employees shall conduct wastewater transport and disposal in accordance with Riverside Municipal Code 14.12, and all applicable Federal, State, County and City regulations. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations."

| Print Name: | Print Title: |
|-------------|--------------|
| | |
| | |
| Signature: | Date: |

iw_group/septic/forms/permit application