



LIQUID WASTE HAULER PERMIT APPLICATION

RETURN APPLICATION BY: _____

PLEASE COMPLETE ALL APPLICABLE ITEMS OR YOUR APPLICATION 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: _____

