TRUCKED INDUSTRIAL WASTE HAULE	R PERMIT APPLICATION	Return to:	City of San Diego - 1 9192 Topaz Way - S Ph: 858-654-4100	Industrial Wastewater Control Progra an Diego, Ca 92123 FAX: 858-654-4110	m	
1) Business Name of Applicant:			Phone:	Email:		
2) Contact Person:			Title:			
3) Facility Address:						
4) Mailing Address:						
5) List the trucks/trailers that will be used to haul permitted For tractor/trailers, provide information for the trailer of		ifornia license pla	te. <u>Trucks not listed</u> wi	ill not be allowed to discharge wastes	÷	
Truck/Trailer Make/Mo	odel Year	Year Capa		License Plate		
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					_	
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					_	
<b>Permittee's Certification</b> : I hereby certify that the information found i covered under one permit are not mixed with any other permitted or unp Waste Requirements bulletin, and I agree to comply with the policies and	permitted wastes. I have received and read bo	nplete and accurate to oth the Trucked Wast	o the best of my knowled te Requirements & Proce	ge. I agree to provide a clean truck such dures and the Department of Health Servi	that the wastes ices' Hazardous	
6) Print Name:			Title:			
7) Signature:			Date:			
TO BE COMPLETED BY THE CITY			-			
TWRP	AR#	AR#		Effective:		
RCRA	Approved By:	Approved By:		Expires:		
Facility Number: FAC-	Permit Number:	Permit Number: PMT-				