

TRUCKED INDUSTRIAL WASTE HAULER PERMIT APPLICATION

Return to: City of San Diego - Industrial Wastewater Control Program
 9192 Topaz Way - San Diego, Ca 92123
 Ph: 858-654-4100 FAX: 858-654-4110

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 wastewater. For tractor/trailers, provide information for the trailer only. Trucks not listed will not be allowed to discharge wastes.

Truck/Trailer Make/Model	Year	Model/ Capacity (gallons)	License Number
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Permittee's Certification: I hereby certify that the information found in this application is familiar to me and is complete and accurate to the best of my knowledge. I agree to provide a clean truck such that the wastes covered under one permit are not mixed with any other permitted or unpermitted wastes. I have received and read both the Trucked Waste Requirements & Procedures and the Department of Health Services' Hazardous Waste Requirements bulletin, and I agree to comply with the policies and requirements set forth therein.

6) Print Name:

Title:

7) Signature:

Date:

TO BE COMPLETED BY THE CITY

TWRP	AR#	Effective
RCRA	Approved By	Expires
Permit Number <u>25-</u> _____		