

**Waste Disposal Application**

**COMPANY IDENTIFICATION:**

UBI# \_\_\_\_\_

Name of company: \_\_\_\_\_

Company address: \_\_\_\_\_

\_\_\_\_\_

Telephone number: \_\_\_\_\_

**VEHICLE INFORMATION:** •

Vehicle make/model: \_\_\_\_\_

Vehicle license no.: \_\_\_\_\_

Vehicle tank capacity: \_\_\_\_\_

Licensing state: \_\_\_\_\_

**HEALTH DEPARTMENT CERTIFICATION?**    YES \_\_\_\_\_    NO \_\_\_\_\_

**WASTE TRANSPORT INFORMATION:**

**Do Vehicles Transport Any Wastes Other Than Household Septic Tank Wastes?**

YES \_\_\_\_\_    NO \_\_\_\_\_

**If Yes, List The Other Types Of Wastes** (i.e., chemical wastes, oil & grease, used motor oil, etc.) **And From Where They Originate** (i/e/, industry, gas stations, restaurants, etc.).

**Type Of Waste:**                      Name, Address, Phone No. And Type Of Operation Of  
Non-Residential Customer

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- **If More Than One Vehicle Is Used, Include Information On Other Vehicles On A Separate Page And Attach To This Application.**

Business Signature: \_\_\_\_\_

Approved By: \_\_\_\_\_