

Septic Hauler Application for Discharge Privileges

SECTION A - GENERAL INFORMATION

1. Company Name _____
Mailing Address _____
Facility Address _____
Telephone Number _____ Fax Number _____
2. Name of person authorized to represent this firm in official dealings with the utility:
Name: _____
Title: _____
Telephone Number: _____
3. Alternate person to contact concerning information provided:
Name: _____
Title: _____
Telephone Number: _____

NOTE TO SIGNING OFFICIAL

In accordance with Title 40 of the Code of Federal Regulations, Part 403.14, information and data provided in this questionnaire that identifies the nature and frequency of discharge shall be available to the public without restriction. Requests for confidential treatment of other information shall be governed by procedures specified in 40CFR 2 (Public Information). The information in this questionnaire will be used to issue a Domestic Septic Waste Hauler Discharge Permit for your facility.

APPLICATION CERTIFICATION STATEMENT

I have personally examined and am familiar with the information submitted in this document and attachments. Based on my inquiry of those individuals immediately responsible for obtaining the information reported herein, I believe that the submitted is true accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and/or imprisonment.

(DATE)

(SIGNATURE OF OFFICIAL)

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SECTION B - DISCHARGE INFORMATION

1. IDEM STATE WASTEWATER MANAGEMENT BUSINESS PERMIT NUMBER: _____

2. Complete the following for each vehicle used:

Specifications	Vehicle #1	Vehicle #2	Vehicle #3
Year			
Make/Model			
Tank Capacity			

3. List those facilities, other than Marion Utilities, that you discharged to in the past 12 months.

Facility Charged To:	Telephone #

4. Marion Utilities accepts sewage that does not exhibit residential characteristics or strength, including, but not limited to, lift station and portable toilet waste. However, these wastes are not to be discharged without the prior approval of the Pretreatment Coordinator. Marion Utilities does not accept process waste from industrial facilities, grease trap waste from food service establishments, or oil/water separator waste from auto repair facilities.

Do you haul waste with non-residential characteristics or strength? YES NO

Do you haul waste prohibited by Marion Utilities? YES NO

SEND COMPLETED APPLICATION TO:

Marion Utilities
Attn: Pretreatment Coordinator
1540 N. Washington St.
Marion, IN 46986

