



Administration Department

1722 Pleasant Valley Rd. · Owensboro, Kentucky 42303

Phone: (270) 687-8440 · Fax: (270) 687-8444

WASTE HAULER PERMIT APPLICATION

PLEASE TYPE OR PRINT CLEARLY IN INK AND SIGN APPLICATION ON NEXT PAGE

Action:

Renewal

New Issue

Applicant Information			
Company Name		Name of Owner or Authorized Contact	
Address		Telephone No.	
		E-mail	

Vehicle Information (First Vehicle)							
Year		Make		Model		License Plate	
State of Registration		*****	*****	Tank Capacity (gallons)		*****	*****
Garage Address (no P.O. Box)							
Is the vehicle covered by liability insurance?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Is the vehicle company owned?		<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Vehicle Information (Second Vehicle)							
Year		Make		Model		License Plate	
State of Registration		*****	*****	Tank Capacity (gallons)		*****	*****
Garage Address (no P.O. Box)							
Is the vehicle covered by liability insurance?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Is the vehicle company owned?		<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Vehicle Information (Third Vehicle)							
Year		Make		Model		License Plate	
State of Registration		*****	*****	Tank Capacity (gallons)		*****	*****
Garage Address (no P.O. Box)							
Is the vehicle covered by liability insurance?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Is the vehicle company owned?		<input type="checkbox"/> Yes	<input type="checkbox"/> No	



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Types of Waste Requested for Permit Approval (check all that apply)		
<input type="checkbox"/> Grease traps/interceptors	<input type="checkbox"/> Holding tanks (industrial)	<input type="checkbox"/> Other _____
<input type="checkbox"/> Septic/holding tanks (domestic)	<input type="checkbox"/> Industrial Wastewater	
<input type="checkbox"/> Portable toilets	<input type="checkbox"/> Solids separators	
<input type="checkbox"/> Surface water/groundwater	<input type="checkbox"/> Leachate	

Service Area (check all that apply)		
<input type="checkbox"/> Daviess County, KY	<input type="checkbox"/> Wabash County, IL	<input type="checkbox"/> Perry County, IN
<input type="checkbox"/> Hancock County, KY	<input type="checkbox"/> White County, IL	<input type="checkbox"/> Pike County, IN
<input type="checkbox"/> Henderson County, KY	<input type="checkbox"/> Crawford County, IL	<input type="checkbox"/> Posey County, IN
<input type="checkbox"/> Hopkins County, KY	<input type="checkbox"/> Daviess County, IN	<input type="checkbox"/> Spencer County, IN
<input type="checkbox"/> Mclean County, KY	<input type="checkbox"/> Dubois County, IN	<input type="checkbox"/> Vanderburgh County, IN
<input type="checkbox"/> Muhlenburg County, KY	<input type="checkbox"/> Gibson County, IN	<input type="checkbox"/> Vigo County, IN
<input type="checkbox"/> Ohio County, KY	<input type="checkbox"/> Knox County, IN	<input type="checkbox"/> Warrick County, IN
<input type="checkbox"/> Warren County, KY	<input type="checkbox"/> Lawrence County, IN	<input type="checkbox"/>
<input type="checkbox"/> Webster County, KY	<input type="checkbox"/> Orange County, IN	<input type="checkbox"/> Other _____

Certification: Accuracy of Information and Agreement with Permit Terms	
<ul style="list-style-type: none"> I certify under penalty of perjury and law that the contents of this document are fully and accurately described to the best of my knowledge and belief. I am aware that there are significant penalties for submitting false information, including the possibility of fine and/or imprisonment for knowing violations. I will ensure that each representative of the company involved in the actual discharge of hauled waste will read, understand, and abide by all permit conditions. The owner agrees to accept full legal responsibility for all damages, direct or indirect, arising out of the activities authorized by this permit and agrees to indemnify and save harmless the District of Columbia Water and Sewer Authority from suits, actions, damages and costs of every name and description resulting from discharges of wastes. I understand that failure to meet the requirements and conditions contained in the Waste Hauler Permit may result in fines, suspension or revocation of all permits, and/or legal prosecution. 	
_____ Name of the Owner or Authorized Agent (Print)	_____ Title (Print)
_____ Signature of the Owner or Authorized Agent	_____ Date



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ATTACHMENT 1

(COMPLETE FOR EACH ADDITIONAL VEHICLE TO BE PERMITTED)

Additional Vehicle Information							
Year		Make		Model		Tag No.	
State of Registration		*****	*****	Tank Capacity (gallons)		*****	*****
Garage Address (no P.O. Box)							
Is the vehicle covered by liability insurance?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Is the vehicle company owned?	<input type="checkbox"/> Yes	<input type="checkbox"/> No		

Additional Vehicle Information							
Year		Make		Model		Tag No.	
State of Registration		*****	*****	Tank Capacity (gallons)		*****	*****
Garage Address (no P.O. Box)							
Is the vehicle covered by liability insurance?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Is the vehicle company owned?	<input type="checkbox"/> Yes	<input type="checkbox"/> No		

Additional Vehicle Information							
Year		Make		Model		Tag No.	
State of Registration		*****	*****	Tank Capacity (gallons)		*****	*****
Garage Address (no P.O. Box)							
Is the vehicle covered by liability insurance?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Is the vehicle company owned?	<input type="checkbox"/> Yes	<input type="checkbox"/> No		

Certification: Accuracy of Information and Agreement with Permit Terms	
Printed Name of Owner or Authorized Agent:	Title:
Signature of Owner or Authorized Agent:	Date: