



CARPET CLEANER DISCHARGE PERMIT APPLICATION

SEPTAGE RECEIVING FACILITY

NAME OF COMPANY		NAME OF OWNER(S) OR AUTHORIZED AGENT	
COMPANY STREET ADDRESS		VEHICLE IDENTIFICATION ACCESS CARD NUMBER(S)	
CITY	STATE	ZIP	TELEPHONE NUMBER
INFORMATION ON VEHICLES THAT WILL BE USED TO DELIVER WASTEWATERS (USE ADDITIONAL SHEET IF NECESSARY)			
VEHICLE #	MAKE	MODEL	YEAR
LICENSE PLATE #	STATE	TANK CAPACITY (gallons)	
VEHICLE #	MAKE	MODEL	YEAR
LICENSE PLATE #	STATE	TANK CAPACITY (gallons)	
VEHICLE #	MAKE	MODEL	YEAR
LICENSE PLATE #	STATE	TANK CAPACITY (gallons)	
LIST ANY OTHER PERMITS THAT YOU HOLD FOR THE TRANSPORTATION OR DISPOSAL OF WASTEWATERS:			
PERMIT #	AGENCY	PURPOSE OF PERMIT	
INSURANCE INFORMATION			
SUBMIT WITH THIS APPLICATION, PROOF OF AUTOMOBILE COVERAGE WITH BODILY INJURY LIMITS OF \$100,000 / \$300,000 AND A PROPERTY DAMAGE LIMIT OF \$50,000.			
CERTIFICATION			
I hereby certify under penalty of law that the information given on this form is true and correct of the best of my knowledge. I understand and accept full legal responsibility for damage, direct or indirect resulting from activities authorized by this permit. I also agree to indemnify and hold harmless Montgomery County and all its agents from suits, actions, damages and costs resulting from any activity authorized or implied under the permit.			
I hereby certify that use of this vehicle identification access card will be restricted to the above identified vehicles and I understand that use of this by a vehicle other than that identified may result in suspension of facility use privileges.			
DATE		SIGNATURE OF OWNER OR AUTHORIZED AGENT	

SHEET _____ OF _____