

# APPLICATION SEWAGE TANK PUMPER PERMIT



ALABAMA DEPARTMENT  
OF PUBLIC HEALTH

## For Department Use Only

\_\_\_\_\_ County Health Department \_\_\_\_\_ Date Fee Paid  
\_\_\_\_\_ LHD Permit No. \_\_\_\_\_ Fee Amount  
\_\_\_\_\_ Date Received \_\_\_\_\_ Receipt No.

## To Be Completed by Applicant

1. Name of Business \_\_\_\_\_ Phone \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

2. Name of Owner/Proprietor \_\_\_\_\_ Phone \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

AOWB Licensee Name \_\_\_\_\_

AOWB License Number \_\_\_\_\_ Expiration Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_

3. Type of Waste to be Hauled: \_\_\_\_\_ Septage \_\_\_\_\_ Raw Septage (Portable/Vault Toilet)

4. Location of Disposal Points, Method of Sewage Disposal, and Type of Waste to be Disposed:

Location	Disposal Method	Type of Waste
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5. Vehicle Information (Attach Additional Sheets if Necessary):

Vehicle Tag #	State of Registration	Capacity (Tank Size)
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6. Disposal Method(s)- Approvals Attached: \_\_\_\_\_ Yes \_\_\_\_\_ No

Application is made pursuant to Alabama Law, Section 22-26-2, Code of Alabama, 1975, Alabama Administrative Code, Chapter 420-3-6.

I agree to allow inspection of all sewage tank cleaning equipment, vehicles, implements, containers, or other devices and sites used in the collection, transportation, or disposal of sewage tank contents. I also agree to mark my vehicle(s) and sewage holding tanks in accordance with the rules governing sewage tank pumpers. I agree to keep adequate records and submit them to the LHD personnel in accordance with Rules of the State Board of Health. I understand that permit renewal is required each year between November 1 and December 31.

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_