



APPLICATION FOR LIQUID WASTE HAULER

GENERAL INFORMATION

In order to expedite the application process, San Bernardino County Department of Public Health, Division of Environmental Health Services (EHS), requires the following in order to fully review your application for approval:

1. A completed APPLICATION FOR LIQUID WASTE HAULER returned to EHS at 385 N. Arrowhead Avenue, 2nd floor, San Bernardino, CA 92415-0160.
2. Copies of Certificates of Insurance naming San Bernardino County as an additional insured and showing the certificate will not expire or terminate without thirty (30) days notice being given to EHS. The following policy limits are to be maintained as follows:
 - a. Vehicle liability (all liquid waste hauler companies) and general liability (companies with three or more trucks) – no less than \$500,000 combined single limit (CSL) for bodily injury and property damage.
 - b. Worker's compensation – no less than \$250,000 including employer's liability.
3. Vehicles must have the tank volume certified at a County Sealer for Weights & Measures or another approved agency. Submit copies of the verification with the application.
4. Copies of vehicle registration for each vehicle that is under permit.
5. Return completed [FORM FOR AGREEMENT TO ABIDE BY LIQUID WASTE HAULER REGULATIONS](#) to EHS at the address listed above prior to the issuance of permit and decals.

You will be notified if your application is not complete. Permit fees must be paid if your application is approved. **Under no circumstances is any applicant allowed to operate within this County until a permit has been issued. Doing so will jeopardize your application and may result in denial of the permit application.**

If you have any questions, call or text EHS at 1-800-442-2283.

PERSONAL INFORMATION

Business Name:		Federal ID #:	
Applicant's Name:	Driver's License #:	Expiration Date:	
Home Address:		Phone:	

BUSINESS INFORMATION

Location of Business:	Phone:
Mailing Address:	Fax:

LIST ALL PARTNERS/CORPORATION OFFICERS (USE AN ADDITIONAL PAGE IF NECESSARY)

Name:			
Permanent Address:	City:	State:	Zip:
Name:			
Permanent Address:	City:	State:	Zip:

REFERENCES

Provide references from two companies that can verify the above applicant is qualified to operate a business as a Liquid Waste Hauler. List the contact name along with their business name, phone number and mailing address.

1) Name:	Business Name:	Phone:		
Address:	City:	State:	Zip:	
2) Name:	Business Name:	Phone:		
Address:	City:	State:	Zip:	

OTHER COUNTIES IN WHICH YOU HAVE A PERMIT TO OPERATE THIS TYPE OF BUSINESS

County Name:	Permit Number:
County Name:	Permit Number:
County Name:	Permit Number:
County Name:	Permit Number:

QUALIFICATIONS (OPTIONAL)

Contractor's License Number:	Type: C - 42	Expiration Date:	Contractor's License Number:	Type: C - 42	Expiration Date:
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WASTE HAULER EXPERIENCE/EMPLOYMENT (USE AN ADDITIONAL PAGE IF NECESSARY)

WASTE DISPOSAL SITES TO BE USED (PROVIDE COPIES OF PERMITS)

VEHICLES TO BE USED (PROVIDE A COPY OF THE WEIGHTS AND MEASURES CERTIFICATE FOR TANK VOLUME)

Make/Model:	Year:	License Plate #:	Tank Volume:
Make/Model:	Year:	License Plate #:	Tank Volume:
Make/Model:	Year:	License Plate #:	Tank Volume:
Make/Model:	Year:	License Plate #:	Tank Volume:

VEHICLE LIABILITY

Company:	Policy Number:	Phone:		
Address:	City:	State:	Zip:	

**WORKERS' COMPENSATION
(REQUIRED FOR COMPANIES WITH EMPLOYEES)**

Company:	Policy Number:	Phone:	
Address:	City:	State:	Zip:

**GENERAL LIABILITY
(REQUIRED ONLY FOR COMPANIES WITH THREE OR MORE VEHICLES)**

Company:	Policy Number:	Phone:	
Address:	City:	State:	Zip:

FICTITIOUS NAME

Has the firm filed for a fictitious business name within San Bernardino County? Yes No

If yes, list the name, where it was filed and the date it was filed?

SIGNATURE(S)

The above information will be reviewed by EHS. The applicant will be notified within thirty (30) days of the application filing date as to the disposition of this application.

Indemnification: The Contractor agrees to indemnify, defend (with counsel reasonably approved by County) and hold harmless the County and its authorized officers, employees, agents and volunteers from any and all claims, actions, losses, damages, and/or liability arising out of this contract from any cause whatsoever, including the acts, errors or omissions of any person and for any costs or expenses incurred by the County on account of any claim except where such indemnification is prohibited by law. This indemnification provision shall apply regardless of the existence or degree of fault of indemnitees. The Contractor's indemnification obligation applies to the County's "active" as well as "passive" negligence but does not apply to the County's "sole negligence" or "willful misconduct" within the meaning of Civil Code Section 2782.

By checking this box, I confirm I am submitting this application electronically and that the information on this form is true and correct. I also acknowledge that I have read, understand and accept any terms and conditions of this form.

I hereby certify, to the best of my knowledge, that the information given on this application is true and correct. Submission of falsified information on this application may be grounds for denial, denial of renewal, revocation or suspension of permit to operate within San Bernardino County.

Applicant Signature:	Date:
Applicant Print Name:	Title:
Alternate Signature:	Date:
Alternate Print Name:	Title:

For Office Use Only

Business Location Assessor's Parcel Number:

Zone:

Does business meet zoning requirements? Yes No

If no, are additional permits required? Yes No

Have these additional permits been obtained? Yes No

For Office Use Only

Fee:	FA Number:	Record ID:	PE Number:
Late Fee: Y N	Designated Employee:	Received By:	Date:
Check One: New Transfer Reactivate	Changes (please specify):		

AGREEMENT TO ABIDE BY LIQUID WASTE HAULER REGULATIONS

GENERAL INFORMATION

Under the San Bernardino County Code, Environmental Health Services (EHS) hereby promulgates the following rules and regulations for the operation, maintenance and care of liquid waste hauling units:

1. All owners of liquid waste hauling vehicles must acquire an EHS permit. No permit shall be issued to a vehicle, unless it bears current State of California license plates or apportioned plates.
2. The name, address and telephone number of the person or firm to whom the permit is issued must appear on both sides of the tank or vehicle. Lettering must be a minimum of three (3) inches high, fully visible and legible at all times.
3. The certified tank volume must appear on both sides of the tank in numbers a minimum of three (3) inches high. Numbering must also be fully visible and legible at all times. The tank volume must be approved and certified by the County Sealer of Weights & Measures or other approved agency.
4. Sludge release outlet controls must be approved by EHS. The sludge release outlet pipe must be threaded on the outer surface and a screw cap to fit the pipe must be attached by a chain to the unit. A cap must be fitted over the outlet pipe at all times, except when the contents of the tank are being discharged. Other types of covers on release outlet pipes may be substituted with approval by EHS. The discharge valve must discharge through a closed line, a pipeline or hose to the final point of discharge without the danger of spilling or splattering.
5. All equipment must be kept clean at all times. Suction hoses must be cleaned out back into the seepage pit, septic tank or grease trap being pumped and not onto the surface of the ground. Suction hoses must be approved by EHS and maintained in good repair.
6. Tanks must be fitted with an automatic shut-off system to prevent the overflow of the tank's contents.
7. At all times, each vehicle must carry a minimum of five (5) gallons of clean water on board for clean-up purposes.
8. At all times, each vehicle must carry 25 feet of garden hose or an equivalent. Bleach, granulated pool chlorine (HTH) or other approved disinfectant must be carried on board each vehicle to disinfect areas when accidental spillage of sewage occurs. Pine Sol or chemical toilet additives are not approved disinfectants.
9. Liquid waste haulers must submit the [Entity Monthly Pumper Report](#) (located on the EHS website) to EHS within 15 days of the end of the month when the pumping occurred. Reports must include: date, site address, what was pumped, how much was pumped and where the wastes were discharged. If nothing was pumped that month, write "No Pumping This Month" across the report.
10. All pertinent records for the current calendar year and the past two (2) calendar years must be kept accurate and must be made available for inspection on demand. The business premises may be inspected at any time during normal business hours.
11. A liquid waste hauler permit applicant must be granted or denied a permit within thirty (30) days from submission of the application, unless special conditions cause the need for additional review by EHS.
12. Vehicle liability, general liability (for companies with three or more vehicles) and worker's compensation (if applicable) insurance coverage must be maintained and forwarded to this office prior to beginning operation. Minimum limits of insurance are specified in the San Bernardino County Code, Section 33.0855.
13. The following information is required on customer receipts/bills:
 - The number of compartments pumped,
 - Estimated gallons removed,
 - Intended location where wastes were discharged, and
 - Estimated charges for disposal of wastes.
14. EHS may revoke a liquid waste hauler permit for failure to pay dump fees incurred through the Solid Waste Management Department.
15. It shall be unlawful for any person to deposit, by any means whatsoever, into any interceptor, private sewer, septic tank or cesspool any ashes, cinders, solids, rags, flammable, poisonous or explosive liquids or gases, oils, grease and any other thing whatsoever which would cause damage to a public sewer, private sewer, or private sewage disposal system. (Excerpted from the Uniform Plumbing Code, Chapter 11, Section 1102.)

Indemnification: The Contractor agrees to indemnify, defend (with counsel reasonably approved by County) and hold harmless the County and its authorized officers, employees, agents and volunteers from any and all claims, actions, losses, damages, and/or liability arising out of this contract from any cause whatsoever, including the acts, errors or omissions of any person and for any costs or expenses incurred by the County on account of any claim except where such indemnification is prohibited by law. This indemnification provision shall apply regardless of the existence or degree of fault of indemnitees. The Contractor's indemnification obligation applies to the County's "active" as well as "passive" negligence but does not apply to the County's "sole negligence" or "willful misconduct" within the meaning of Civil Code Section 2782.

By checking this box, I confirm I am submitting this application electronically and that the information on this form is true and correct. I also acknowledge that I have read, understand and accept any terms and conditions of this form.

NOTE: APPLICANT UNDERSTANDS THAT FAILURE TO COMPLY WITH ANY OF THE STANDARDS WILL RESULT IN REVOCATION OF THE PERMIT TO OPERATE, AT THE DISCRETION OF EHS.

Applicant Signature:		Date:
Applicant Print Name:	Title:	
Alternate Signature:		Date:
Alternate Print Name:	Title:	