



COUNTY OF RIVERSIDE
DEPARTMENT OF ENVIRONMENTAL HEALTH

(888)722-4234 • RIVCOEH.ORG

APPLICATION FOR LIQUID WASTE HAULERS

BUSINESS NAME: _____ FOR YEAR: _____

BUSINESS ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

FULL NAME OF OWNER: _____

OWNER ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

BUSINESS PHONE: _____ CELL PHONE: _____

EMAIL: _____ FAX: _____

Liquid Waste Hauler Permits:

FIRST LIQUID WASTE VEHICLE				\$
EACH VEHICLE AFTER THE 1 ST VEHICLE	X		=	\$
MAINTENANCE FACILITY	X		=	\$
TOTAL AMOUNT DUE				\$

**FOR OFFICE
ONLY**

TYPE OF SERVICE PROVIDED:

☐ Grease

☐ Septic Waste

☐ Portable Toilet

☐ Industrial

☐ Animal By-Products

☐ Sludge

IF DISPOSAL SITE IS ON PRIVATE LAND, PROVIDE OWNER NAME AND ADDRESS

IF STORAGE TANK/FACILITY IS USED, PROVIDE LOCATION



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VEHICLE INFORMATION

YEAR	MAKE	MODEL	LICENSE NO.	TANK CAPACITY	VIN NO.

Indicate trucks approved by the State to haul hazardous waste in addition to non-hazardous waste with an asterisk (*).

Vehicles registered with the State as hazardous waste hauling vehicles will be exempt from local registration fees under Riverside County Ordinance 640. However, the following documentation will be required to qualify for this exemption for each particular vehicle:

- ☐ A copy of the hazardous waste hauler registration issued by the Department of Health Services.
- ☐ A copy of the vehicle safety report issued by the Department of Transportation.



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Attach the following documents as applicable:

1. A clearance from the land development section of this Department for those permittees in Riverside County who intend to operate an intermediary storage tank located below the surface of the ground.
2. Submit a copy of the certificate of inspection from a division of weights and measures or similar agency for each vehicle listed on the vehicle information sheet.
3. Provide a copy of the owner's valid government issued ID.

We agree to abide by all conditions, orders, and directives issued pursuant to this permit if granted for the business listed above on the condition that the person named in the permit will comply with the laws, ordinances, and regulations that are now or may hereafter be in force by the United States government, the State of California, and the County of Riverside pertaining to the above mentioned business. I hereby certify that all entries made by or under my direction in this application are true and complete to the best of my knowledge.

SIGNATURE

DATE

TITLE

For Office Use

Date: _____ Fee \$ _____ Ck. # _____ Trans. # _____

Approved by (Title): _____