

**BUDD INLET TREATMENT PLANT
APPLICATION FOR DISCHARGE
MOBILE FOOD VENDOR**



Directions: The application form must be filled out completely and signed by the owner(s) of the company.
If the business address is a P.O. Box, a street address (i.e. where the vehicles are parked) is required.

Business Information

Business Name		Federal Tax ID Number	
Business Mailing Address	City	State	Zip
Street Address (if different from mailing address)	City	State	Zip
Name of Owner(s)	(If you are a Sole Proprietor and do not have a Federal Tax ID Number) *Social Security Number		
Owner(s) Address	City	State	Zip
Business Phone	Owner's Phone		

Type of Waste Hauled:

Grey Water Tank Containing: _____

Portable Toilet

Year	Make	License #	Capacity (gallons)	LOTT Access Card #

Certification Statement

I certify under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for willful violations.

Name of Owner (Please Type or Print)	Signature of Owner	Date
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Name of Owner (Please Type or Print)	Signature of Owner	Date
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Access Granted To Discharge at LOTT BUDD Inlet Treatment Plant:		
Approved By (Printed Name)	Signature	Date