



Contract Hauled Waste Disposal Application

SECTION I - GENERAL INFORMATION

Company Name _____

Address _____

Mailing Address _____

Billing Address _____

Owner Name _____

Phone _____

Cell Phone _____

Fax _____

Email _____

SECTION II - Permits Held

Environmental-related permits held for this facility/location: (Air, Stormwater, Wastewater, etc):

SECTION II - FACILITY OPERATIONAL CHARACTERISTICS

Type of waste company wishes to discharge: _____

Please give a general description of industrial/trade activities and/or plant processes on the premises:

Standard Industrial Classification (SIC) Code: _____ NAICS: _____

Average amount: (gal) _____ Frequency _____

Tank Capacities

Number of Holding Tanks: _____

Number of Septic Tanks: _____

Number of Other Tanks: _____



How will wastes be transported to the Lynchburg Regional Wastewater Treatment Plant?

Designated Truck Hauled Waste Company _____

Type of wastewater treatment, if any, prior to discharging _____

Please list all chemicals in contact with the wastewater: _____

Please attach any test data.

Additional Comments: _____

SECTION V – CONTACT INFORMATION FOR THIS REGISTRATION

Authorized representative for official interactions/contact with Publicly Owned Treatment Works (POTW):

Name

Signature

Date

E-mail Address

Phone

Fax

Street Address,

City, State

Zip Code

Please Return Application to:
IMC@lynchburgva.gov
Industrial Monitoring Coordinator
Lynchburg Regional Wastewater Treatment Plant
2301 Concord Turnpike
Lynchburg, VA, 24504