

SWEETWATER COUNTY SOLID WASTE DISPOSAL DISTRICT NO. 1
P.O. Box 1493, Rock Springs, WY 82902-1493 (307) 352-6869 Fax (307) 352-6867

WASTE DISPOSAL PERMIT FOR CONTAMINATED SOIL

Permit No. _____

For District Use Only

Name of Disposer: _____

Name of Hauler: _____

Address: _____

Address: _____

City, State, Zip: _____

City, State, Zip: _____

Telephone: _____

Telephone: _____

Fax or Email: _____

Fax or Email: _____

Disposal Fee: _____

Type of Truck: _____

Bill To: _____

Acct. Payable Contact: _____

Billing Address: _____

Type of contaminated soil: _____

If petroleum contaminated, does soil contain any free liquids? _____

Name of Waste Generator: _____

(Address/Location) _____

Estimated Amount of Waste (tons) _____

Anticipated Date of Disposal _____

*The Operator to which this permit is issued hereby agrees that he will comply with all rules and regulations of the District pertaining to the disposal of solid waste and that **he will be liable for and promptly pay** the District for any applicable disposal charges as noted and for any damage done to the District property by his employees or associates.*

Comments:

Applicant Signature

General Manager

Title

Date

Date Approved

Method of Payment:

 Invoice

 Cash/Check/CC

Expires: _____

A copy of this permit shall be kept in the vehicle for which it was issued and shall be available for inspection by personnel of the District at such times as said vehicle is at the District site.

Copies:

White - Solid Waste District

Canary - Scalehouse

Pink - Applicant