

Clark County Combined Health District
Division of Environmental Health
529 E. Home Road
Springfield, OH 45503
Phone: 937-390-5600 Fax: 937-390-5625

Registration Application
Septage Hauler
For Calendar Year 2010

Annual Fee - \$50.00 + \$10.00 per truck

***Please Note: Your 2009 registration will expire on December 31, 2009**

Business Name: _____

Contact Name: _____

Mailing Address: _____

Telephone: _____

Make of Truck	Model of Truck	License Place #	Tank Capacity in Gallons	CCCHD Permit Number Issued

Below is a list of places where I dispose of the septic tank waste that is collected:

By signing this application, you agree to abide by any and all state laws and regulations and by the regulation set forth by the Clark County Combined Health District.

Applicant Signature

Date

Health Department Use Only

Registration #: _____ Receipt #: _____ Date: _____