SWEETWATER COUNTY SOLID WASTE DISPOSAL DISTRICT NO. 1

P.O. Box 1493, Rock Springs, WY 82902-1493 (307) 352-6869

WASTE DISPOSAL PERMIT FOR CONTAMINATED SOIL

City, State, Zip: Telephone: Telephone: Empile Empile			Permit No.	
Address: City, State, Zip: City, State, Zip: Telephone: Email: Telephone: 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 soild 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 Italie Date Date Date Approved Method of Payment: Invoice Expires: Expires:			_	For District Use Only
City, State, Zip: City, State, Zip: Telephone: 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 Method of Payment: Invoice Expires: Expires:	Name of Disposer:		Name of Hauler:	
Telephone: Email: Email: 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 Expires: Expires:	Address:		Address:	
Email:	City, State, Zip:		City, State, Zip:	
Disposal Fee: Type of Truck: Bill To: Acct. Payable Contact: Billing Address: Type of contaminated soil: 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 Method of Payment: Invoice Cash/Check/CC	Telephone:		Telephone:	
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 Method of Payment: Invoice Expires: Invoice Expires:	Email:		Email:	
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 Method of Payment: Invoice Cash/Check/CC Expires:	Disposal Fee:		Type of Truck:	
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 Method of Payment: Invoice Cash/Check/CC Expires:	Bill To:		Acct. Payable Conta	et:
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 Expires:	Billing Address:			
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 Expires:	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:	,,	·		
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:				
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 Expires:				
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	/A 11 // // // // // // // // // // // //			
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	Estimated Amount of V	Waste (tons)		
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	Anticipated Date of Dispo	a a a l		
Title Date Date Approved Method of Payment: Expires:	pertaining to the dispos	sal of solid waste and	d that he will be liable for and promp age done to the District property by his	otly pay the District for any applicable s employees or associates.
Method of Payment: Invoice Cash/Check/CC Expires:	Applicant Signature		General Manager	
Method of Payment: Invoice Cash/Check/CC Expires:				
Invoice Cash/Check/CC	Title	Date	Date Approved	
	Method of Payment:			Expires:
	A capy of this po			shall be available for inspection by

Copies: White - Solid Waste District Canary - Scalehouse Pink - Applicant

personnel of the District at such times as said vehicle is at the District site.