

**APPLICATION FOR REGISTRATION TO HAUL SEPTAGE WITHIN
PICKAWAY COUNTY FOR THE YEAR 202_**

**PICKAWAY COUNTY PUBLIC HEALTH
110 ISLAND RD., SUITE C
CIRCLEVILLE, OH 43113
Phone: 1-740-477-9667 Fax: 1-740-474-5523**

Business Name: _____ Business ID# _____
 Operator Name: _____ Date: _____
 Street Address: _____
 City, State, Zip: _____ Phone: _____
 Cell Phone: _____ Fax: _____ E-Mail: _____
 Land Application Site: _____
 Sewage Treatment Plant Location: _____
 Bond Company: _____ Bond Expiration Date: _____

I HEREBY AGREE TO ALL RULES AND REGULATIONS OF THE OHIO REVISED CODE 3718 AND THE OHIO ADMINISTRATIVE CODE 3701-29.

SUCH REGISTRATION SHALL BE VALID UNTIL DECEMBER 31, 2022 UNLESS SUSPENDED.

Year	Make	Body	License	ID	Capacity	Vehicle Permit Fee
Total Vehicle Permits:						
Company Registration Fee:						
Total Fee:						

APPLICANT _____ DATE: _____
 (SIGNATURE)

 (Office Use Only)

YEAR 2022 Registration Approved: _____ Registration Denied: _____ Insurance

Test Date: / / Test Score: _____ CEUs Attached Bond Attached

DATE _____ RECEIPT # _____ Received by: _____