

## Commonwealth of Massachusetts City/Town of

## **Application for Industrial Wastewater Hauler Permit**

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Fee			

Expires (close of year issued)

MassDEP has provided this form for use by local Boards of Health if they choose to do so. Before using the form, check with your local Board of Health to make sure that they will accept it.

In accordance with MGL c. 111, Section 31A, and 314 CMR 18.12, the undersigned makes

Important: When filling out forms on the computer, use only the tab key to move your cursor - do not use the return key.





Name				
Company Name				
Address				
City/Town		State	Zip Code	
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		Telephone Nun	nber	
Number and Types of	Equipment and their gall	on capacity:		
Number	Туре		Gallonage	
Number	Туре		Gallonage	
Number	Туре		Gallonage	
Areas from which indu	strial wastewater will be	accepted (append	customer list):	
List all locations where		d of (include a cop	y of the contract or the approval	
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Date

Signature of Applicant