



INDUSTRIAL HAULER PERMIT APPLICATION AND PERMIT

Name of Individual or Organization: _____

DBA: _____

Address: _____

Telephone Number: _____

Describe Business/Nature of Work: _____

Estimated Gross Receipts for the next quarter: \$ _____

Estimated Annual Gross Receipts: \$ _____

CERTIFICATIONS

Read each of the statements below. After you have read and understand them, please sign and date in the space provided at the end of this section.

- A. I have read the “Terms and Conditions for Industrial Refuse Collection Permit”, understand their contents, have supplied true and correct information herein to the best of my knowledge, and will comply with said terms and conditions.
- B. I understand falsification or misrepresentation on my part of any information constitutes grounds for denial of this application, or for revocation of any permit which may be hereafter granted, should any of the conditions under which it was granted be violated.
- C. I understand a non-refundable permit fee of \$500 is due at the time of application and annually thereafter concurrently with the franchise fee.
- D. I certify I will comply with the reporting of gross receipts and annual payment of franchise fee and permit fee.
- E. I certify I will comply with the quarterly reporting of all tonnage data and information on the industrial waste stream volume required under State solid waste reduction statutes.

Permit No. _____



F. I certify I will comply with all pertinent provisions of the Lodi Municipal Code, and all other applicable laws and regulations.

Signature of Applicant

Date

Please return completed application and all applicable documentation to the **Public Works Department, Attn: Industrial Hauler Permit Application, PO Box 3006, Lodi, CA 95241**, or by email to **solidwaste@lodi.gov**.

TO BE COMPLETED BY CITY

Processing checklist:

- () Permit and Franchise Fees submitted to the Finance Department
- () Certificate of Insurance received and approved
- () Proof of Inspection by California Highway Patrol and/or San Joaquin County Health Department of all vehicles used
- () Bond for potential defaults or failures to pay franchise fee
Bond Amount \$ _____

Finance Director Approval _____

Date: _____

Approval of Permit:

The undersigned hereby approves the issuance of a permit to the applicant. This permit is renewable annually upon submission of the annual Industrial Refuse Collector Report and payment of the annual permit fee.

Print Name

Signature

Date

Permit No. _____