

Fee \$125.00 Includes 1st Truck - Additional Trucks \$50.00/ea. (25% late fee if not registered prior to first job of the year)

2022
APPLICATION/REGISTRATION
HSTS SEPTAGE HAULER/CLEANER

Lorain County Public Health
9880 South Murray Ridge Road, Elyria, OH 44035
PH# 440-322-6367 Fax# 440-322-6010

Business Name _____

Business Mailing Address _____ City _____ Zip _____

Owner/Operator _____

Business Ph# _____ Cell Ph# _____

Mailing Address (If different then Business Address) _____

_____ Email _____

Fax# _____

I Hereby agree to comply with the Ohio Department of Health Household Sewage Regulation (O.A.C. Chapter 3701-29), and Lorain County Public Health Residential Sewage Regulations as they pertain to septage haulers. I acknowledge that copies of the above regulations are available at the Health Department for my review.

Septage Hauler/Cleaner Signature

Date

YOU ARE NOT REGISTERED UNTIL THE HEALTH DEPARTMENT HAS REVIEWED AND APPROVED THIS APPLICATION:

Office Use Only

Vehicle Inspection(s): Truck #1: Yes [] No [] Truck #2: Yes [] No [] Truck #3: Yes [] No []
(Attach inspection report forms for all vehicles)

Certificate of Insurance Yes [] No [] Proof of a Surety Bond Yes [] No []
Surety Bond # _____

Proof of completion of at least six continuing education hours from 2021 Yes [] No []

Copies of system specific training Yes [] No []

Location(s) of Disposal _____

Registration Approved: Yes [] No [] Review/Approved by _____
(Registered Sanitarian)

Registration Number(s) _____ Receipt Number _____ Date _____
_____ Check # _____ Cash [] Amt.\$ _____
_____ Receipt by: _____

Please Provide Vehicle Information

Vehicle # 1

Truck Make and Type _____

Color of Cab _____ Color of Tank _____ Year _____

Tank Maximum Capacity _____ (gallons) License Plate No. _____

Pump Size and Type _____

Additional Trucks (Vehicle Permit required for each truck):

Vehicle # 2

Truck Make and Type _____

Color of Cab _____ Color of Tank _____ Year _____

Tank Maximum Capacity _____ (gallons) License Plate No. _____

Pump Size and Type _____

Vehicle # 3

Truck Make and Type _____

Color of Cab _____ Color of Tank _____ Year _____

Tank Maximum Capacity _____ (gallons) License Plate No. _____

Pump Size and Type _____

***If any changes are made to the above information during the 2022 license year
please notify this department.***