



## Community and Economic Development Environmental Health Division

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<http://www.madera-county.com/index.php/departments-of-the-rma/environmental-health>

ONE APPLICATION FOR EACH SEPTIC PUMPER TRUCK. APPLICATION FOR REGISTRATION TO ENGAGE IN THE BUSINESS OF SEPTIC TANK CLEANING, PUMPING, AND TO DISPOSE OF THE CONTENTS THEREFROM. THIS PERMIT IS FOR SEWAGE WASTEWATER PUMPING ONLY.

NAME OF APPLICANT: \_\_\_\_\_ DATE: \_\_\_\_\_

RE: APPLICATION TO ENGAGE IN ABOVE-NAMED BUSINESS UNDER THE FIRM NAME OF:

\_\_\_\_\_  
Pursuant to Section 25000 through 25010 inclusive of the California Health and Safety Code, application is hereby made to carry on the business of cleaning septic tanks, cesspools, sewage and seepage pits and to dispose of the contents therefrom within the territory under your jurisdiction of the year \_\_\_\_\_.

***(If individual, fill in line #1. If partnership or corporation, list names and addresses of all partners or officers, use back of form if more room is needed.) Select the mailing address using the checkbox.***

Name of Firm: \_\_\_\_\_

Business Owner's Full Name: \_\_\_\_\_

Business Address: \_\_\_\_\_

Business P.O. Box (if any): \_\_\_\_\_

Home Address: \_\_\_\_\_

Business Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

The following is a list of my equipment to be used in MADERA COUNTY:

\_\_\_\_\_  
Make/Model/Year of Pumper Truck      Vehicle License Plate      Tank Capacity      Other County Permit(s)

**Certificate from Sealer or Weights & Measures required and attached to this application.**

*I, the applicant, hereby acknowledge the receipt of a supply of monthly report forms and understand I must report monthly, by the 5<sup>th</sup> day of each month, all pumping activities including date, location, and name of customer.*

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date