

SIERRA COUNTY Human Services

Department of Public Health
P.O. Box 7
202 Front Street
Loyalton, CA 96118

Phone: 530.993.6701
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Janice Maddox
Director

APPLICATION FOR LIQUID WASTE HAULERS

(For use in initial application or annual renewal)

This shall serve as application for permit to operate as a liquid waste hauler in Sierra County. In accordance with Section 25003 of the California health and Safety Code, the applicant is required to supply the following information:

NAME(S) OF APPLICANT: _____

ADDRESS: _____ PHONE: _____

COMPANY NAME: _____

ADDRESS: _____ PHONE: _____

EMAIL: _____

MAKE AND YEAR OF VEHICLE: _____

COLOR: _____ SIZE (TONS): _____

TANK CAPACITY (GALLONS): _____ LICENSE NUMBER: _____

NAME/LOCATION OF DISPOSAL SITE(S): _____

The annual fee is \$132.00 payable to Sierra County Health Department. Please submit fee with application.

I certify under penalty of perjury that the above is true and correct.

SIGNATURE OF APPLICANT

DATE