

# SEPTIC HAULER IDENTIFICATION and TRACKING REPORT

Permittee: \_\_\_\_\_

Month - Year: \_\_\_\_\_

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

Registration No.: WVSG

Date	PICK UP (gallons/day)					TREATMENT		DISPOSAL (gallons/day)		
	Septic Tanks	Portable Toilets	Grease Trap	Package Plants	Industrial or Commercial	Lime Used	pH	Land Applied	Sewer Plant	Other/ Storage
1										
2										
3										
4										
5										
6										
7										
8										
9										
10										
11										
12										
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20										
21										
22										
23										
24										
25										
26										
27										
28										
29										
30										
31										
<b>Total</b>										

*I certify under penalty of law that the management practices and pH adjustment requirements of Federal Regulation 40 CFR Part 503 and State Regulation Title 33 Series 2 have been met for all sewage sludge and septage land applied during this reporting period. This determination has been made under my supervision in accordance with a system designed to ensure that qualified personnel properly gather and evaluate information used to determine these requirements have been met. I also certify that this document and all the attachments were prepared under my direction or supervision, and that the information is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information including fine and imprisonment.*

Signature: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_