



County of San Diego

DEPARTMENT OF ENVIRONMENTAL HEALTH LAND AND WATER QUALITY DIVISION

5500 Overland Ave., Suite # 201, San Diego, CA 92123
P.O. Box 129261, San Diego, CA 92112-9261
(858) 565-5173 | (800) 253-9933 | www.sdcdeh.org



APPLICATION FOR SEWAGE HAULER PERMIT

TO ENGAGE IN THE CLEANING OF SEPTIC TANKS, CHEMICAL TOILETS, CESSPOOLS, OR SEEPAGE PITS AND THE TRANSPORTATION AND DISPOSAL OF CLEANINGS

Name of Business: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Business Address: _____

City: _____ State: _____ Zip Code: _____

Business Phone Number: (____) _____ Email: _____

Legal Owner(s): _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number: (____) _____ Email: _____

Emergency Contact: _____ Cell Phone Number: (____) _____

Services Provided: Septic Tanks Seepage Pits Portable Restrooms Cesspools Other: _____

Primary Liquid Waste Disposal Facility Name: _____

Facility Address: _____

City: _____ State: _____ Zip Code: _____

Alternate Liquid Waste Disposal Facility Name: _____

Facility Address: _____

City: _____ State: _____ Zip Code: _____

The undersigned hereby applies for a sewage hauling permit registration. I declare under penalty of perjury that to the best of my knowledge and belief, the information I have provided is true and accurate. I understand that to become and remain registered and eligible to provide hauling services in San Diego County, I must pay the annual registration fee established by the County under applicable law. I also agree to conform to all conditions, orders, and directions issued pursuant to the California Health and Safety Code and all applicable County and City Ordinances including California Health and Safety Code Division 104, Part 13, Chapter 4, Article 1. and San Diego County Code Sections 68.601 – 68.613.

Date: _____
_____ Print Name _____ Signature

FOR OFFICE USE ONLY

Permit Number	# of Vehicles	Date