



Boise Office: 707 N. Armstrong Place  
327-7499 Boise ID 83704

Mc Call Office: 703 N. 1st Street  
634-7194 Mc Call ID 83638

Mountain Home Office: 520 E 8th North  
587 -9225 Mountain Home ID

### APPLICATION FOR PERMIT TO OPERATE SEPTIC TANK PUMPING EQUIPMENT

APPLICANT INFORMATION  New Establishment  New Truck Truck license number \_\_\_\_\_

Business Name _____			
Owner of Equipment	<input type="checkbox"/> No <input type="checkbox"/> Yes	Phone # _____	E-mail _____
Mailing Address _____			
	City	State	Zip
Equipment Storage Site _____			
Name of Equipment Owner _____			
Mailing Address _____			
	City	State	Zip
Phone# _____	E-Mail _____		

**Fees are due and payable upon submission of this application.**

**A copy of each vehicle's registration must accompany this application.**

**Every truck application requires a signature from each disposal site that will be used.**

#### APPROVAL OF SEWAGE DISPOSAL SITE

Name of Permitter _____	
Address _____	
<i>Permission is granted to:</i> Name _____	
Address _____	
<i>For disposal of septic tank sludge by the following method:</i> <input type="checkbox"/> Sewage Treatment Plant <input type="checkbox"/> Burying	
<input type="checkbox"/> Municipal Sewer system <input type="checkbox"/> Drying	
Date ____/____/____	_____ Signature of Treatment Plant Operator

<b>OFFICE USE ONLY</b>	Permit # _____
<input type="checkbox"/> Copy of Vehicle Registration	Receipt # _____
<input type="checkbox"/> Disposal Site/Plant Operator signature	Amount \$ _____

