

**IMPERIAL COUNTY  
DEPARTMENT OF PUBLIC WORKS  
155 SOUTH 11<sup>TH</sup> STREET  
EL CENTRO, CA 92243**

**APPLICATION FOR SOLID WASTE DISPOSAL PERMIT  
(442) 265-1818  
(442) 265-1858 FAX NO.**

DATE \_\_\_\_\_

COMP. NAME \_\_\_\_\_ RESP. PARTY/OWNER \_\_\_\_\_

ADDRESS \_\_\_\_\_ HOME ADDRESS \_\_\_\_\_

P.O. BOX \_\_\_\_\_ CITY \_\_\_\_\_

CITY \_\_\_\_\_ DRIVER'S LIC. # \_\_\_\_\_

BUS. PHONE \_\_\_\_\_ FAX # \_\_\_\_\_ HOME PHONE \_\_\_\_\_

The undersigned hereby applies for permission to dispose of solid waste as follows:

<u>TYPE</u>	<u>SOURCE</u>	<u>AMOUNT OF WASTE</u>
Demolition Waste	_____	_____
Refuse	_____	_____
Clean Fill Rubble	_____	_____
Other (Please Specify)	_____	_____

The following hauling vehicle or vehicles will be used:

<u>TYPE</u>	<u>SIZE</u>	<u>COMPANY TRUCK NO.</u>	<u>VEHICLE LICENSE NO.</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

List additional vehicles on reverse side.

Desired Site Usage: \_\_\_\_\_

The undersigned (permittee) agrees to do the work in accordance with County rules and regulations. **INITIAL** \_\_\_\_\_

Weight tickets are required for all loads. We require a tare weight (empty weight) and a loaded weight ticket for each load disposed of at the landfill.

**Signature:** \_\_\_\_\_