##### Instructions For Applying For A Pennsylvania

**Registration For Transporting Residential Septage**

**RESIDENTIAL SEPTAGE HAULER REGISTRATION FORM**

In order to transport residential septage in the Commonwealth, you must complete and submit the enclosed registration form to the Pennsylvania Department of Environmental Protection (DEP), Bureau of Clean Water, Division of Municipal Facilities, P.O. Box 8774, Harrisburg, PA 17105 - 8774. Instructions for completing the form as required by PA Code, Title 25, Section 285.225 are included. Copies of this citation are available upon request.

Please be advised that you must be registered to transport residential septage within Pennsylvania by July 25, 1997, or upon beginning operations, whichever occurs later. Processing of the completed registration form should take 60 days or less. DEP will issue a transporter number that must be displayed on the sides and rear of each vehicle hauling the residential septage.

In addition to registration for the transportation of residential septage, you should contact the Bureau of Clean Water to register under a general permit if you intend to land apply the residential septage. For additional information concerning the septage hauler registration or the land application of septage general permit, you may contact DEP at RA-EP-PABIOSOLIDS@pa.gov.

Only transporters who pick up and/or deliver residential septage within this Commonwealth are required to register with DEP.

After reviewing the completed registration application, DEP will send a registration number to the applicant.

1. Enter owner’s name.

2. Enter company name, address, location, municipality, county and phone number.

3. Enter name of contact person, phone number and title.

4. Estimate the total gallons of residential septage per year that you pick up.

5. Place a check mark in the appropriate box.

6. Self-explanatory.

Send the completed application for registration to the following address:

Pa. Department of Environmental Protection

Bureau of Clean Water

Division of Municipal Facilities

11th Floor, Rachel Carson State Office Building

P.O. Box 8774

Harrisburg, PA 17105-8774

**SEPTAGE HAULER REGISTRATION FORM**

Registration No. (To be completed by DEP)

1. Owner’s Name:

2. Owner’s Title:

3. Name of Company:

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| --- |
| Mailing and Registration Address:        |
| Location: Principal Place of Business:       |

County:       , If within PA, Municipality:

Bus. Phone No.:

 (Area Code)

4. Name of Contact Person:       Phone No.:

 (Area Code)

Title of Contact Person:

Contact Email:

5. Estimate the average yearly gallons of septage transported.

6. Do you land apply septage? [ ]  Yes [ ]  No

7. Certification. This is to certify that the information contained in this application is true, correct, and complete to the best of my knowledge.

 Print or Type Name of Owner Title

#####  Signature of Owner Date Signed