Oxford Water Works & Sewer Board

Post Office Box 3663 Oxford, AL 36203 (256) 831-5618

APPLICATION FOR SEPTIC TANK/GREASE TRAP PUMPING PERMIT

Name of Pumper		Telephor	ne
Street Address			
City			
Owner's Name		Telephoi	ne
Mailing Address			
City			
AOWB Licensee Name			
AOWB License No			
Oxford Water Works & Sewer E	Board Permit Number _		
Homeowner or Business Inforr	nation:		
Homeowner's or Business Nam	e		
Street Address			
City			
Type of Waste to be Pumped:			□Other
Means of Collecting, Transport	ing, and Disposing of Se	ewage	
Location of Disposal Points, me	thods of sewage dispos	sal, and type of waste t	o be disposed
Location	Disposal Meth	• • • • • • • • • • • • • • • • • • • •	Type Waste
Vehicle Information			
Vehicle Tag Number	State of Regis	tration	Sewage Tank Capacity

	Permit Number		 Date	 Initials
	Oxford Water \	Works & Sewer Bo	ard Use Only	
	ng completed Disposal Informatior pump permit.	n back to the Oxfor	d Water Works & Sewe	r Board's office to
Disposal [Date and Time:			
Disposal L	ocation of Waste:			
To Be Cor	npleted After Disposing of Waste:			
Jignature	or Applicant		Dute	
Signature	of Applicant		Date	
Type or Pi	rint Applicant's Name			
devices and my vehicle	d sites used in the collection, transport (s) and sewage holding tank and to kee It personnel in accordance with the ru	tation, or disposal of ep adequate records	sewage tank contents. I a and submit them to the le	also agree to mark
	on is made pursuant to Alabama Law (! <u>Code</u> , Cl Illow inspection of all sewage tank clea	hapter 420-3-134(1)(a)1.	
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