



# Recreational Vehicle Sewage Disposal Site Permit Application

## General Information

Business Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Site Operator Name: \_\_\_\_\_

Is the site operator the owner of the facility?  Yes  No

Designated Signatory Authority for the Business:

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Cell: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Designated Contact Person for the Business:

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Cell: \_\_\_\_\_ E-Mail: \_\_\_\_\_

## Site Information

Number of RV Disposal Sites at the Business: \_\_\_\_\_

For each RV Disposal Site, provide the following:

Location of Disposal Site: \_\_\_\_\_

\_\_\_\_\_

Number of loads discharged per day: \_\_\_\_\_

Total volume discharged at site per day: \_\_\_\_\_ gallons

Size of Drain at Site: \_\_\_\_\_ Lockable Cap on Drain Pipe?  Yes  No

Describe Site Security (locks, gates, fences, signage) and Hours of Operation: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Is a water hydrant available for rinsing?  Yes  No

Is a Discharge Log maintained for each load discharged?  Yes  No

Does an attendant witness each discharge at the dump site(s)?  Yes  No

Additional Information on Site: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations. (Must be signed by Owner/Officer/Manager of the company)

Printed Name/Title: \_\_\_\_\_  
Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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**RECEIPT INFORMATION FOR CITY OF GRAND JUNCTION, WWTP OFFICE USE ONLY;**

<b>Permit Application Fee:</b>	
Payable to the City of Grand Junction	<input type="checkbox"/> <b>\$165.00</b> for facilities with approved <b>RV disposal site</b>
<b>Account Number 902-615-260-4340_15</b>	
<b>Check Paid by:</b> _____	<b>Check Number:</b> _____
<b>Received By (signature):</b> _____	<b>Date Fee Received:</b> _____
<b>TREASURER RECEIPT NUMBER:</b> _____	<b>Date Of Treasurer Receipt:</b> _____

**Mail Completed Form To:**  
Industrial Pretreatment Program  
251 27 Road  
Grand Junction, CO 81505  
(970)-256-4180