



MOUNT HOLLY MUNICIPAL UTILITIES AUTHORITY

Date Received: _____

Septage/Hauler Application

PLEASE TYPE OR PRINT LEGIBLY

Company Name: _____

Parent or Affiliated Company Name(s): _____

Physical Address: _____

City: _____ State: _____ Zip: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____ Contact Name: _____ Title: _____

Emergency Phone Number (24 hour): _____ Contact Name: _____

e-mail Address: _____ Company website address: _____

NJDEP registration number (Division of Solid & Hazardous Waste): _____

Year in which septage (or hauling) activities began: _____

Environmental Permits Held

Indicate all environment permits held by this facility (or attach list). Include permits issued by other sewerage authorities or municipal utility authorities.

Permit Y/N	Permit Type	Permit #	Regulated Activity or Equipment
	Solid Waste Facility		
	Discharge to Surface Water		
	Discharge to Ground Water		
	Significant Indirect User		
	Air Pollution Control		
	Small Quantity Generator		
	Other:		
	Other:		
	Other:		



MOUNT HOLLY MUNICIPAL UTILITIES AUTHORITY

Septage/Hauler Application

Compliance History

For the most recent five years, indicate all business related civil or criminal enforcement actions *initiated* for violations of permits listed above or any Federal, State or local statutes, ordinances or regulations. Also list any administrative or judicial orders (or attach list).

I have personally examined and am familiar with the information submitted in this document and attachments. Based upon my inquiry of those individuals immediately responsible for obtaining the information reported herein, I believe that the submitted information is true, accurate and complete.

By: _____
Person Signing

Date: _____

Printed Name

Title: _____



MOUNT HOLLY MUNICIPAL UTILITIES AUTHORITY

Hauled Wastes Credit Application

Please be advised that submission of this form does not guarantee credit privileges. All dischargers will be required to pay for at least the first load in certified funds at the time of disposal. All invoices are due and payable upon receipt. Following a 30 day grace period, interest at the rate of 1.5% per month will accrue. If you have any questions or require assistance in completing this form, please contact the Billing Clerk at 609-267-0015. To avoid delays in service, or errors in billing, please notify the MHMUA promptly of any changes to this information.

PLEASE TYPE OR PRINT LEGIBLY

	Generator	Billing (if different)
Company Name		
Mailing Address		
City, State, Zip		
Phone		
Accounts Payable Contact		
Bank's Name		
Bank's Address		
Bank's Phone		

PLEASE PROVIDE US WITH AT LEAST THREE CREDIT REFERNCES.

Company Name	Phone	Contact Person



MOUNT HOLLY MUNICIPAL UTILITIES AUTHORITY

Fleet Information Sheet

The information requested below will be entered into the MHMUA's database system that is used to generate receipts for wastes discharged to MHMUA, and invoices for same. Please complete and return this form to the attention of Thomas Koslowski. If you will be hauling your wastewater yourself (i.e. septage), list every trailer (or tank truck) that will be using our facilities. If you will be contracting for hauling services, please determine which trailers (or tank trucks) will be used for your project, and enter only that equipment in the lower table. If you have any questions or require assistance in completing this form, please contact Thomas Koslowski, Industrial Pretreatment Program Coordinator at 609-267-1110. To avoid delays in service, or errors in billing, please notify the MHMUA promptly of any changes to this information.

PLEASE TYPE OR PRINT LEGIBLY

	Generator	Hauler (if different)
Company Name		
Mailing Address		
City, State, Zip		
Phone Emergency		
Contact Person		

NJDEP registration number: _____

	License Number	Tank Capacity (gallons)	Owner (if other than hauler)
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			
19			
20			

Form completed by: _____

Date: _____

② MHMUA
decal

③ Tank
capacity



NJDEP decal ①

④ NJDEP
registration #