CWA AUTHORITY, INC. / BELMONT AWT APPLICATION / REGISTRATION FOR LIQUID WASTE HAULER PERMIT

COMPANY NAME:		DATE:
ADDRESS:		
OWNER'S NAME:	CONTACT PERSON:	
TELEPHONE:	FAX:	E-MAIL
TYPE OF WASTES HAULED (Check all that apply):		
□ Domestic / Residential Septage	□ Restaurant Grease Traps	☐ Commercial / Industrial Wastewaters
□ Other (Please describe)		
Provide information on all vehicles with <u>tanks</u> used for waste hauling. Attach additional sheets as necessary.		
1 VIN	2 VIN	3 VIN
Tank Volume	Tank Volume	Tank Volume
Other ID*	Other ID*	Other ID*
4 VIN	5 VIN	6 VIN
Tank Volume	Tank Volume	Tank Volume
Other ID*	Other ID*	Other ID*

IMPORTANT: Each applicant must furnish proof of \$1 million combined single limit automobile liability insurance. **Attach insurance certificate stating coverage AND listing the <u>CWA Authority, Inc.</u> as additional insured.** You can request that your insurance carrier submit the updated C-O-I to the IPP via EMAIL at *bnoel@citizensenergygroup.com*.

- MAILING INSTRUCTIONS -

Mail the application, check (if necessary), and insurance certificate, (if not forwarded by carrier) to:

CWA Authority 2020 North Meridian Street Indianapolis, IN 46202 ATTN: Environmental Stewardship

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^{* &#}x27;Other ID' refers to a permanent, displayed vehicle identifier used by the hauler.

Prefer that it is NOT License Plate, since that number can change.