



Environmental Health ❖ 463 Aviation Blvd., Santa Rosa, CA 95403 ❖ 707-565-6565 ❖ EH@sonomacounty.gov
<https://sonomacounty.gov/environmentalhealth>

SEPTAGE VEHICLE PERMIT APPLICATION

APPLICANT: Complete all areas below (please print or type), sign and date below, and submit to Environmental Health with the applicable fee.

Business Name _____ Phone _____

Address _____ Emergency Phone _____

City _____ State _____ Zip _____

Owner(s) Name(s) _____ Email _____

Mailing Address (if different from above) _____

City _____ State _____ Zip _____

Is the storage yard located within Sonoma County? ☐ Yes ☐ No

If "No," the storage yard must be permitted within the county it is located.

Address of vehicle/trailer storage yard:

Address _____ City _____ State _____ Zip _____

Description of vehicle(s)/trailer(s) to be permitted* (Please attach a separate sheet if additional room is needed.)

Vehicle/Trailer Make	Year	License #	Vehicle ID # (VIN)	Capacity (gal)

Facility name/address of septage disposal site:

Address _____ City _____ State _____ Zip _____

Will the septage be transferred to a holding vehicle? ☐ Yes ☐ No

I hereby acknowledge that all the information above is true and accurate. I agree to abide by the conditions of the permit.

Applicant Signature _____ Date _____

Print Name _____ Title _____

For office use only:

Application Date _____ FA # _____ Permit Issued by _____

☐ Cash ☐ Check/Credit Card Trans# _____ Date Rec'd _____ by _____ Amount Rec'd \$ _____