Return application and payment to:
Hamilton County Public Health
Attn Waste Management
1701 Patricia McCollum Way, Dept. 93
Cincinnati, OH 45237

HAMILTON COUNTY PUBLIC HEALTH
PREVENT. PROMOTE. PROTECT.
1701 Patricia McCollum Way, Dept. 93
Cincinnati, OH 45237
Phone: 513.946.7800 Fax: 513.946.7890
hcph.org

Application for Permit to Haul Garbage

Facility Name: _____ Telephone Number: _____

Application Contact: _____ Email: _____

Address: _____

Address/Location Where Trucks are Parked: _____

Person to Contact to Arrange Inspection: _____

Inspection contact's email: _____

Inspection contact's Phone: _____

Name of Disposal Facility: _____

Please Indicate Number of Trucks You Operate: _____ @ 20.00 each = $ 0.00

Please List Truck Information Below or Attach List with Information

(Please Print Clearly)

YEAR	MAKE & MODEL OF TRUCKS	Truck #	LICENSE NUMBER

Do Your Trucks Have Liquid Tight Bodies or Tanks? ☐ Yes ☐ No

I agree to comply with the rules and regulations of the Board of Health pertaining to my business.

Authorized Signature: _____ **Date:** _____