STANDARD OPERATING PROCEDURE FOR LICENSURE TO HAUL NON HAZARDOUS LIQUID WASTE IN LARAMIE COUNTY

1. Complete requirements of the Environmental Health Department:
   100 Central Avenue
   Room 201
   Cheyenne, WY 82001
   307-633-4090

   Signature of Environmental Health Representative:

   ________________________________________________________________

   Printed Name and Title of Environmental Health Representative:

   ________________________________________________________________

2. After fulfilling requirements listed under #1 above and obtaining appropriate signature, return this signed form to:

   Administration Building
   2416 Snyder Avenue
   Cheyenne, WY 82003-1469
   Contact: Billie Knifong, Customer Service Supervisor
   307-637-6447

   Sign the Water and Sewer Department Sewer Dump Permit Contract

   Billing method (check one):       account ______
                                    dump tickets ______

   Signature of Customer Service Supervisor:

   ________________________________________________________________

   “S” number assigned:

   __________
3. After fulfilling requirements listed under #2 above and obtaining appropriate signature, return this signed form to:

Dry Creek Water Reclamation Facility
8911 Campstool Rd.
Cheyenne, WY 82001
Contact: Vicki Dowdy, Industrial Pretreatment Program Coordinator
307-635-3163

Representative Initial: _____ Complete and sign Waste Hauler Information Sheet

_____ Review and sign “Hauled Septage and Grease Trap Waste Operating Procedures”

_____ Review and obtain current dump rate schedule

Make an appointment to conduct truck inspection with Industrial Pretreatment Program:
Contact: Vicki Dowdy or Nathanial Kaufhold 307-635-3163

Representative Initial: _____ “S” number and business name must be displayed on side of truck in accordance with “Hauled Septage and Grease Trap Waste Operating Procedures”

_____ Functional sight glass or other approved device to allow a visual check of tank volume

_____ Tank volume verification check at Dry Creek WRF

_____ Tank volume displayed on side of tank

_____ Submit copies of Material Safety Data Sheets (MSDS) for chemicals used in portable toilets

_____ Copy of insurance certificate indicating amount and type of liability insurance

Only after all items listed in this operating procedure are complete and signed will the hauler be authorized to discharge to the Board of Public Utilities Water Reclamation Facilities.