Board of Public Utilities
Cheyenne Water and Sewer Departments

2416 Snyder Ave
P.O. Box 1469 (mailing)
Cheyenne, Wyoming 82003

Phone (307) 637-6460
www.cheyennebopu.org

Waste Hauler Information:

1:  Name of Business: _____________________________________________________________
    Owner(s): ____________________________________________________________________
    Address of Business: ____________________________________________________________
                                                                      ______________________
                                                                      ______________________
    Phone number of Business: _____________________________________________________
    Name of Contact at Business: ___________________________________________________

2.  What type of wastes do you haul? Check all that apply.
    _____ Domestic Septage from residences
    _____ Domestic Septage from commercial/industrial
    _____ Waste from restaurant grease traps
    _____ Waste from sand traps/oil water separators from automotive service stations, car
         washes, truck maintenance facilities
    _____ Waste from pits, tanks, traps from other commercial sources not listed above.

    List the type of waste: ____________________________________________________________
                                                                                     ______________________
                                                                                     ______________________

    Waste from groundwater cleanup activities (underground storage tank cleanups, groundwater
    remediation sites)
    _____ Gasoline Cleanups
    _____ Diesel Cleanups
    _____ Other. Specify: ____________________________________________________________

    Waste from industrial sources (fabrication, metal finishing, painting, etc) Specify: ______
                                                                                     ______________________
                                                                                     ______________________
    _____ Waste from oil field activities
    _____ Waste from military or other governmental activities
    _____ Other (specify): ____________________________________________________________
    _____ Other (specify): ____________________________________________________________

Attach pages as needed to provide the information on types of waste.
3. Waste Hauling Information

   # of trucks operated by your business

   100-499 gallon capacity _________
   500-999 gallon capacity _________
   1000-1999 gallon capacity _________
   2000-2999 gallon capacity _________
   3000-3999 gallon capacity _________
   4000-4999 gallon capacity _________
   >5000 gallon capacity _________

4. Estimate the total number of loads per week for all trucks:

   _____ To be disposed of (or requesting to be disposed of) at the POTW
   _____ To be disposed of at sites other than the POTW

5. Estimate of total gallons picked up per week for all trucks:

   _____ To be disposed of (or requesting to be disposed of) at the POTW
   _____ To be disposed of at sites other than the POTW

6. Method of disposal of wastes (check all that apply):

   _____ Publicly-Owned Treatment Works (POTW) City-owned wastewater treatment facility
   _____ Land Application
   _____ State or County approved waste disposal site
   _____ Municipal Landfill
   _____ Disposal authorized by NPDES or Biosolids permit
   _____ Disposal pit
   _____ RCRA or Hazardous Waste Disposal Facility
   _____ Other (specify): ____________________________________________________________
   _____ Other (specify): ____________________________________________________________

7. Amount of Liability Insurance carried for environmental cleanup and with which insurance company?

   ____________________________________________________________________________
   ____________________________________________________________________________
   ____________________________________________________________________________
Certification:

I certify under penalty of law that this document and all attachments were prepared under my supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

____________________________________
Owner Signature

____________________________________
Owner Name Printed

______________________________
Date

Please complete and sign this survey. Mail to:

Cheyenne Board of Public Utilities
Attn: Industrial Pretreatment Program
PO Box 1469
Cheyenne, WY 82003

For hand delivery:
Cheyenne BOPU Water Reclamation Facility
8911 Campstool Road
Cheyenne, WY 82007