

PERMIT APPLICATION

This application is for permits only and does not automatically generate a credit account with LCSWMA. Please contact our office at 717-397-9968 or email acctrec@lcswma.org to obtain a credit application.

I hereby apply for a LCSWMA Permit, in accordance with the Rules and Regulations of LCSWMA. Therefore, the following information is submitted:

The *majority* of your waste will be delivered to \square Lancaster \square Harrisburg (please check one) 1. COMPANY NAME: **BUSINESS (Physical) ADDRESS:** MAILING ADDRESS: **EMAIL ADDRESS:** TELEPHONE NUMBER: FAX NUMBER: CONTACT PERSONS: 2. Attach evidence of Vehicular Liability (minimum insurance required under Motor Vehicle Financial Responsibility Law) and General Liability (Bodily Injury, \$100,000 per occurrence, and Property Damage, \$100,000 per occurrence) Insurance Coverage. 2.a. Yes, I have attached the required evidence of Insurance Coverage. If not attached, this permit application will not be processed until LCSWMA is in receipt of a current insurance certificate.

Certificate of Insurance Coverage is attached to this application

Initial here

LCSWMA

USE

ONLY

A Permit **MAY NOT** be transferred from the vehicle or container to which it was originally issued. Are your vehicles required to have an Act 90 Waste Transportation Safety 3. Program (WTSP) permit from PADEP? (Trucks over 17,000 lbs registered vehicle weight (RVW) or Trailers over 10,000 lbs RVW are required to have this permit before LCSWMA can accept materials) ☐ Yes □ No If yes, please provide proof of permit or letter of acceptance/ processing from PADEP. 4. Indicate if your company has ever been convicted of civil or criminal offenses concerning solid waste transporting, processing or disposal in Lancaster County. Yes □No If Yes, provide details on separate sheet. 5. Is your company required to carry Workers Compensation Insurance by the State of Pennsylvania? ∐ No Yes If Yes, attach evidence of Workers' Compensation coverage. This Application is for the Permit(s) being issued for the vehicle(s) and/or 6. container(s) that are listed on the attached pages. Vehicle(s) and/or Container(s) are owned or leased by the applicant. 7. **CERTIFICATION** I hereby certify that the information provided herein is true and correct; that I am familiar with and will comply with the Rules and Regulations of the LCSWMA; and that I will pay all fees and accept all penalties as set forth in the Rules and Regulations of the LCSWMA. Authorized Signature Date

Title

Print or Type Name

8. **VEHICLES** (REFER TO PAGE 6 FOR INSTRUCTIONS)

(Shaded areas for LCSWMA use)

LCSWMA PERMIT NUMBER	VEHICLE YEAR AND MAKE	VEHICLE LICENSE PLATE NUMBER	VEHICLE BODY TYPE	NEW, REPLACE, OR INACTIVATE	FOR LCSWMA USE ONLY

9. **CONTAINERS** (REFER TO PAGE 6 FOR INSTRUCTIONS)

(Shaded areas for LCSWMA use)

LCSWMA PERMIT NUMBER	TYPE OF CONTAINER	FOR LCSWMA USE ONLY

10. SLUDGE & SEPTAGE OR SOURCE SEPARATED RECYCLABLES

IF SLUDGE & SEPTAGE AND/OR SOURCE SEPARATED RECYCLABLES IS INDICATED AS WASTE OR MATERIAL TYPE IN SECTIONS 10 AND 11, PLEASE COMPLETE THE FOLLOWING: LIST BELOW THE PROCESSING OR DISPOSAL SITES TO WHICH YOUR SLUDGE & SEPTAGE OR SOURCE SEPARATED RECYCLABLES WASTE OR MATERIAL TYPES WILL BE DELIVERED. REFER TO PAGE 6 FOR INSTRUCTIONS.

WASTE OR MATERIAL TYPE	PROCESSING OR DISPOSAL SITE	PADEP PERMIT NUMBER, IF APPLICABLE	LCSWMA USE ONLY - FACILITY ID #
	Name:		
	Address:		
	Phone No.:		
	Name:		
	Address:		
	Phone No.:		
	Name:		
	Address:		
	Phone No.:		

PLEASE NOTE:

LIST ALL DISPOSAL SITES FOR SLUDGE & SEPTAGE OR SOURCE SEPARATED RECYCLABLES MATERIAL YOU COLLECT. IF MORE SPACE IS NEEDED, YOU MAY EITHER PHOTOCOPY THIS PAGE OR USE AN ADDITIONAL SHEET OF PAPER.

DELIVERY OF SLUDGE & SEPTAGE OR SOURCE SEPARATED RECYCLABLES TO ANY SITE OTHER THAN THOSE LISTED ABOVE WILL BE CONSIDERED A VIOLATION OF LCSWMA RULES AND REGULATIONS. THIS LIST CAN BE UPDATED VIA A LETTER AT ANY TIME THROUGHOUT THE YEAR.

INSTRUCTION PAGE

VEHICLE BODY TYPES:

AUTOCAR

REAR LOADER

FRONT-END LOADER

SIDE LOADER

ROLL-OFF TRUCK

PICKUP TRUCK

TRI-AXLE (DUMP TRUCK)

STAKE BODY

VAN

PUMP TRUCK

TANKER TRUCK

CONTAINER TYPES:

ROLL-OFF

COMPACTOR

LUGGER BOX

SEMI-TRAILER

UTILITY TRAILER

EXAMPLES:

VEHICLES, Page 3, No. 8

LCSWMA PERMIT NUMBER	VEHICLE YEAR AND MAKE	VEHICLE LICENSE PLATE NUMBER	VEHICLE BODY TYPE	NEW, REPLACE, OR INACTIVATE	FOR LCSWMA USE ONLY
	2004 Ford	ABC 1234	Pickup	New	

CONTAINERS, Page 4, No. 9

LCSWMA PERMIT NUMBER	TYPE OF CONTAINER	FOR LCSWMA USE ONLY
	40 Yard Roll-Off	

If replacing a permit, please write the new permit number in the 1st column (LCSWMA PERMIT NUMBER) and write the number it is replacing in the "NEW, REPLACE, OR INACTIVATE" column. See example below:

LCSWMA	VEHICLE (V) YEAR AND MAKE or CONTAINER TYPE(C)	VEHICLE	VEHICLE	NEW,	FOR
PERMIT		LICENSE PLATE	BODY	REPLACE, OR	LCSWMA
NUMBER		NUMBER	TYPE	INACTIVATE	USE ONLY
17000	(V) 2004 Ford	ABC 1234	Pickup	Replaces 16000	