



**Cheyenne - Laramie County
Health Department
100 Central Ave.
Cheyenne, WY. 82007
(307) 633-4090**

NON-HAZARDOUS LIQUID WASTE HAULERS (PUMPER)
LICENSE APPLICATION

PLEASE PRINT

- A) **APPLICATION:** (Please make check payable to **“ENVIRONMENTAL HEALTH”**).
- Please check appropriate category: New Fee: (\$300.00) ____ Renewal Fee: (\$180.00) ____
Individual ____ Corporation ____ Firm ____
- B) NAME OF BUSINESS: _____ PHONE: () _____
BUSINESS ADDRESS: _____
CITY: _____ ST: _____ ZIP: _____
CELL PHONE: () _____
- C) If a corporation or firm, give the proper corporation/firm name, agent for service, and corporation/firm officers:

- D) NAME OF APPLICANT: _____ PHONE: () _____
APPLICANT HOME ADDRESS: _____
CITY: _____ ST: _____ ZIP: _____
- E) THE APPLICANT CERTIFIES THAT HE/SHE IS FULLY ACQUAINTED WITH THE LARAMIE COUNTY SMALL WASTEWATER SYSTEMS REGULATIONS, SECTION 17, AND WILL CONDUCT THE BUSINESS IN COMPLIANCE WITH THE REGULATIONS.
- DATE: ____/____/____ APPLICANT’S SIGNATURE: _____
PLEASE INDICATE YOUR VEHICLE(S) “S” NUMBER(S): _____

ACTION BY HEALTH AUTHORITY: _____
DATE: ____/____/____ AUTHORITY SIGNATURE: _____

NOTE: PLEASE PROVIDE PROOF OF INSURANCE WITH APPLICATION FEE, THANK YOU.