

# Manifest

Of Hauled Wastewater Discharged at WMU WWTP

## SECTION 1 – WASTEWATER HAULER

Company Name: \_\_\_\_\_

Truck/Permit Number: \_\_\_\_\_ Truck's Permitted Capacity: \_\_\_\_\_ gallons

Volume Hauled (check one):  Full Load  Half Load

Waste Originated From (check all applicable):  Septic Tank  Grease Trap  Other: \_\_\_\_\_

Type of Waste:  Domestic  Industrial  Commercial

## SECTION 2 – GENERATOR OF WASTEWATER

Note: If load is comingled, complete section 2 below and on page 2 as necessary for each wastewater source.

Wastewater came from \_\_\_\_\_

Contact Person at Above Location:

Name: \_\_\_\_\_

Date hauler loaded wastewater \_\_\_\_\_

Address: \_\_\_\_\_

Time hauler loaded wastewater \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Phone # \_\_\_\_\_

Email address: \_\_\_\_\_

By signing below I certify that I am the contact person at the above location and that I observed the wastewater hauler load his vehicle from said location. Furthermore, I attest that that the collected wastewater contains no hazardous or industrial waste and agree to be contacted by representatives of WMU for the purposes of verifying the information contained in this document.

\_\_\_\_\_  
Wastewater Originator Signature

\_\_\_\_\_  
Date

By signing below I certify under penalty of perjury that the above described wastewater was picked up and hauled by me to the Strodes Creek Wastewater Treatment Plant for disposal. I understand that WMU reserves the right to collect a sample and/or refuse to allow me to discharge waste at WMU facilities.

\_\_\_\_\_  
Hauler Signature

\_\_\_\_\_  
Date

## SECTION 3 – ACCEPTANCE BY WINCHESTER MUNICIPAL UTILITIES WWTP

Disposal Date \_\_\_\_\_

Disposal Time \_\_\_\_\_

By signing below I certify the above manifest information has been reviewed by me and I witnessed the discharge of the hauler's waste into the Strodes Creek Wastewater Treatment Plant.

\_\_\_\_\_  
WMU Employee Signature

**SECTION 2 – GENERATOR OF WASTEWATER**

Note: If load is comingled, complete section 2 for each wastewater source on page 2.

Wastewater came from \_\_\_\_\_

Contact Person at Above Location:

Name: \_\_\_\_\_ Date hauler loaded wastewater: \_\_\_\_\_  
Address: \_\_\_\_\_ Time hauler loaded wastewater: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_  
Phone # \_\_\_\_\_ Email address: \_\_\_\_\_

By signing below I certify that I am the contact person at the above location and that I observed the wastewater hauler load his vehicle from said location. Furthermore, I attest that that the collected wastewater contains no hazardous or industrial waste and agree to be contacted by representatives of WMU for the purposes of verifying the information contained in this document.

\_\_\_\_\_  
Wastewater Originator Signature

\_\_\_\_\_  
Date

**SECTION 2 – GENERATOR OF WASTEWATER**

Note: If load is comingled, complete section 2 for each wastewater source on page 2.

Wastewater came from \_\_\_\_\_

Contact Person at Above Location:

Name: \_\_\_\_\_ Date hauler loaded wastewater \_\_\_\_\_  
Address: \_\_\_\_\_ Time hauler loaded wastewater \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_  
Phone # \_\_\_\_\_ Email address: \_\_\_\_\_

By signing below I certify that I am the contact person at the above location and that I observed the wastewater hauler load his vehicle from said location. Furthermore, I attest that that the collected wastewater contains no hazardous or industrial waste and agree to be contacted by representatives of WMU for the purposes of verifying the information contained in this document.

\_\_\_\_\_  
Wastewater Originator Signature

\_\_\_\_\_  
Date