



## SEPTAGE DISCHARGE PERMIT APPLICATION

**GENERATOR (Do not complete Section C)**       **HAULER**

### GENERAL INSTRUCTIONS

The Virgin Islands Waste Management Authority's (VIWMA) Wastewater Rules and Regulations provided pursuant to Title 29 V.I.C. § 496 and Title 19 V.I.C. Chapter 56 § 1555 (b), require septage haulers who wish to discharge into the Authority's Waste Water treatment plants (WWTPs) to complete and file a Septage Discharge Permit Application and receive a VIWMA Septage Discharge Permit before discharging. This form must also be completed if the hauler must reapply because of an expired permit or one which will expire.

**Please read the following instructions in its entirety before completing the form.** If you have questions about the application, or about the Authority's septage discharge permit requirements, please contact the office of Compliance Management at (340) 712-4951 (STX) or (340)715-9100 (STT/STJ).

1. You must answer all questions carefully. If more space is needed, please attach additional pages and number the responses to correspond with the specific questions asked.
2. Attach any applicable plans, drawings, and any detailed explanation which you feel may be relevant to your application.
3. If you have previously submitted information required by this application and that information is unchanged, please resubmit copies of the material so that the VIWMA can confirm that the information in our file is current and complete.
4. The application must be signed and dated by an authorized representative of the applicant company or entity to be accepted. An **authorized representative** includes:
  - a. **A responsible corporate officer**, if the applicant is a corporation. For the purpose of this application, a responsible corporate officer means a president, secretary, treasurer, or vice president of the corporation, or some other person duly authorized by the corporation to bind the entity.
  - b. **A general partner or proprietor** if the applicant is a partnership or sole proprietorship, respectively;
  - c. **Duly authorized representatives** of the individual designated in (a) or (b) of this section if:
    - i. The authorization is made in writing by the individual set forth in (a) or (b).
    - ii. The authorization specifies either an individual or a position having responsibility for the overall operation of the hauling business, or having overall responsibility for environmental matters for the company; and
    - iii. The written authorization is duly executed and submitted to the VIWMA.
5. If on reapplication, an authorization previously submitted is no longer accurate because a different individual or position has responsibility for the overall operation of the hauling business, or overall responsibility for environmental matters for the applicant, a new authorization document satisfying the requirements of this Section must be submitted to the VIWMA prior to, or together with, the next report required of the permittee.



## **APPLICATION INSTRUCTIONS (PART I)**

1. The completed application, supporting documents (please see below), a *non-refundable* **APPLICATION PROCESSING FEE OF \$200.00, including a vehicle processing fee** (please see below) shall be submitted to the Virgin Islands Waste Management Authority approximately **thirty (30) days prior** to permit expiration to prevent disruption/suspension of disposal privileges at the selected treatment plant.

### **2. Payment Method**

- a. **Money Order**
- b. **Certified Check**
- c. **Credit Card (Visa and Master Card only)**

**\* Please make all certified checks and money orders payable to VIWMA**

3. **Incomplete applications will delay the issuance of the septage collection and disposal permit and will not be processed until all supporting documentation and payment is received by the Authority.**

4. **Late Application/Expired Permit:** It is the sole responsibility of the permittee to renew permits thirty (30) days prior to the expiration of the permit in order to avoid these additional costs and fees:

- a. Permittees submitting applications after their expiration date will be charged **an additional \$200.00** in addition to all other fees associated with the permit process

### **5. Supporting documents required for application processing:**

- a. **Valid vehicle registration**
- b. **Valid vehicle insurance**
- c. **Current business license and proof of liability insurance**
- d. **Commercial Motor Vehicles Inspection Lane Checklist**
- e. **Payment**

### **6. Vehicle processing fee:**

- |                  |   |
|------------------|---|
| a. 1-3 (Vehicle) | \$150.00  |
| b. 4-6           | \$200.00  |
| c. 7-10          | \$250.00  |
| d. 11-13         | \$300.00  |
| e. 14-17         | \$350.00  |
| f. 17+           | \$350.00 plus \$50.00 for each additional (1-3) vehicle(s). |

7. **ALL SEPTAGE PERMIT APPLICANTS ARE SUBJECT TO THE FEE OF \$75.00 PER 1,000 gallons.** Each disposal load at the Waste Water Treatment Plant (WWTP) is subject to the completion of the Waste Manifest and must accompany each load of disposal at the WWTP.

8. **Once the application is received, the processing period of all completed applications is thirty (30) days from the date in which the application is received by the Compliance Management Division at VIWMA.** Once the permit has been generated, a VIWMA employee will contact you to schedule a vehicle inspection and issue the VIWMA sticker decals and official permit. **(Please see attached vehicle inspection checklist).** PLEASE ENSURE THAT YOU ADHERE TO THE VIRGIN ISLANDS SEPTAGE RULES AND REGULATIONS, PERMIT GUIDELINES PROVIDED BY VIWMA, AND THE FEDERAL REGULATIONS. Any violations will be subject to enforcement actions with penalties.



**Office Locations**

#252 Estate Glynn  
Kingshill, VI 00850  
PH: 340.712.4962 | FX: 340.719.1835

7410 Estate Bovoni, Bay 2,  
St. Thomas, V.I. 00802  
PH: 340.715.9100 FX: 340.777.3284

6 Susannaberg  
Cruz Bay, VI 00830  
PH: 340.774.2141 FX: 340.715.0458

**SECTION A: GENERAL INFORMATION**

1. **BUSINESS NAME OF APPLICANT** \_\_\_\_\_

1a. Corporate Name, if different \_\_\_\_\_

2. **BUSINESS PHYSICAL ADDRESS** *(If different from mailing address)* \_\_\_\_\_  
\_\_\_\_\_

3. **MAILING ADDRESS** \_\_\_\_\_ **ZIP** \_\_\_\_\_

4. **NAME OF PERSON TO RECEIVE PERMIT:**

\_\_\_\_\_  
Name Title

5. **BILLING ADDRESS** \_\_\_\_\_ **ZIP** \_\_\_\_\_

6. **NAME OF PERSON TO RECEIVE BILL:**

\_\_\_\_\_  
Name Title

7. **AUTHORIZED REPRESENTATIVE:**

Name: \_\_\_\_\_ Title: \_\_\_\_\_  
Telephone No.: \_\_\_\_\_ Facsimile No.: \_\_\_\_\_  
E-Mail Address: \_\_\_\_\_

8. **FACILITY REPRESENTATIVE** (Contact person concerning information contained herein):

Name: \_\_\_\_\_ Title: \_\_\_\_\_  
Telephone No.: \_\_\_\_\_ Facsimile No.: \_\_\_\_\_  
E-Mail Address: \_\_\_\_\_



**SECTION B: WASTE WATER DISPOSAL FACILITY TO BE USED BY APPLICANT**

- |  |                                     |
|--|-------------------------------------|
| <u>Facility</u>                          | <u>District</u>                     |
| <input type="checkbox"/> Anguilla        | <input type="checkbox"/> St. Croix  |
| <input type="checkbox"/> Mangrove Lagoon | <input type="checkbox"/> St. Thomas |

**SECTION C: VEHICLES AND STORAGE TANKS**

- Number of vehicles to be used to haul septage: \_\_\_\_\_
- Provide the information in the following table for each vehicle to be used to haul septage:

License Plate No.	Vehicle Identification No.	Make/Model	Year	Cab Color	Tank Color	Capacity (Gallons)

(If more than six (6) vehicles are to be used to haul septage, please attach a separate sheet of paper with the above information for the additional vehicles).

- From the list of the vehicles to be used by the hauler, specify the vehicle(s) that will be used to pump or discharge septage into the VIWMA’s waste water treatment plants.

License Plate No.

- |            |            |
|------------|------------|
| (1.) _____ | (4.) _____ |
| (2.) _____ | (5.) _____ |
| (3.) _____ | (6.) _____ |

*(The company will not be permitted to use any vehicle to pump or discharge septage into the WWTPs that is not listed above).*

- Do you use tanks to store septage  YES  NO
  - List the type (permanent structure or mobile), capacity (gallons), and location of each tank used to store septage, and indicate if the septage is then discharged at the Authority’s waste water facility:



Tank	Permanent (yes/no)	Mobile (yes/no)	Capacity (Gallons)	Location of Tank (physical address)	How Long Septage Retained In Storage Tanks
(1)					
(2)					
(3)					

(If more than three (3) tanks are used, please attach a separate sheet of paper with the above information for the additional tanks).

**SECTION D: ACCURACY OF INFORMATION & ACCEPTANCE OF LIABILITY**

I \_\_\_\_\_, duly authorized representative of \_\_\_\_\_ hereby certify under penalty of perjury under Virgin Islands or Federal Laws, rules and regulations, that to the best of my knowledge and belief, the appended document and all attachments were prepared under my direct or delegated supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system, or the 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 in our application or reports to the VIWMA, including the possibility of fine and imprisonment or the denial of or revocation of its septage hauling privileges for knowing violations.

All waste scheduled for disposal at the VIWMA Waste Water Treatment Plants is properly classified and identified and is not a RCRA or USVI hazardous waste as defined by the Virgin Islands Waste Management Authority, the Department of Planning and Natural Resources/Division of Environmental Protection (DPNR/DEP) or the US Environmental Protection Agency (USEPA) criteria (Ref: Title 19, Chapter 56 VIC, and 40CFR Subparts B-D, Part 261).

I further certify that I have read the instructions on this application form and understand my responsibilities and has authorized the preparation and filing of this application.

Signature \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

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**-DO NOT WRITE BELOW THIS LINE-**

Receipt Number: _____ Cashier: _____ Date: _____ <b>WASTE MANAGEMENT AUTHORITY ACTION:</b> Disposal of Application: <input type="checkbox"/> APPROVED <input type="checkbox"/> DISAPPROVED Signature _____ Date _____
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### Credit Card Authorization Form

Date: \_\_\_\_\_

Name on the Card: \_\_\_\_\_

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

Type of Card: Visa  MC

Credit Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Security Code: \_\_\_\_\_

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

City, State, Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Order/ Invoice Number: \_\_\_\_\_

Item(s) Purchased \_\_\_\_\_

Amount to be Charged \_\_\_\$\_\_\_\_\_

***By signing this form, you authorize the V.I Waste Management Authority to charge your card for the amount listed above.***

Signed: \_\_\_\_\_ Date: \_\_\_\_\_



## VEHICLE CHECKLIST

Date:

### General Information

Company Name:
License:
Vehicle ID#:
Valid License Plate and must be Visible:
Company LOGOS on truck:

### Vehicle Type

Flat Bed	Dump Truck	Roll On/Off	Other

### Hydraulic System

	Pass	Fail	N/A
Functional			
Leaks			
Safety Devices			

### Body Box or Dump Truck

	Pass	Fail	N/A
Structure			

### Lights

	Pass	Fail	N/A
Hazard			
Reverse			
Reverse Horn/Beeper			
Signals			
Brakes			
Head Lights			

### Tools

	Pass	Fail	N/A
Fire Extinguisher			
Tarpaulin/Cover			
Triangle/Cones/Spill Kit			

Must Have Two of the Following:

- 1) Shovel 2) Rake 3) Broom