

Butler County Department of Environmental Services Special Waste Evaluation Request Form

SWERF

For Discharge at the LeSourdsville Septic Receiving Station
(Print or type the requested information)

Waste hauler requesting evaluation:

Company Name: _____
Contact Person: _____
Phone Number: _____
Date: _____

Customer / Material Generator:

Customer Name: _____
Site Address: _____
Company Contact: _____
Type of Business: _____

Description of Material:

Is this domestic waste only? Yes No

If No what is the origin, or what process generated this waste? _____

Description of Tank:

Circle type of tank

 Holding Septic Separator Pit Treatment Plant Other

If OTHER, explain: _____

If Separator Pit, is oil present? Yes No

If YES, how is oil to be disposed? _____

Description of Tank: Continued

Describe location of pit, tank or trap where oil is to be disposed:

Total gallons to be discharged:

Number of discharges per year:

Is this material a hazardous waste under RCRA or CERCLA definition?

Has waste been previously tested? (Attach Analysis)

How was waste previously disposed?

Hauler: _____ **Disposal site:** _____

I understand that failure to complete any part of this form may result in rejection of this request. A separate SWERF form must be completed for each requested site to be pumped. The information contained in this request is complete and true to the best of my ability to determine. I understand that falsification of information in this request is a violation of the Butler County Sewer Use Rule and could result in civil and criminal penalties.

Generator's Signature

Date

Print Name

**Completed requests may be mailed to: Butler County Department of Environmental Services
Attn: Tara Dickerson
130 High Street
Hamilton, OH 45011**

**Butler County Department of Environmental Services
LeSourdsville Septic Receiving Station**

**Trucked Waste Discharge
Disposal Site Sheet**

SWERF# _____

Manifest # _____

Hauler Name: _____

Hauler Phone Number: _____

Name of Generator: _____

Customer's Phone Number: _____

Butler County Permit Number: _____

Other Permitting: _____

Address where waste was generated from: _____

Waste Type:

- | | | | |
|---------------------|---------|-------|--|
| Domestic: | septic | _____ | Portable toilet holding tank |
| | holding | _____ | Restaurant or commercial grease separator |
| Non-Domestic | septic | _____ | commercial car wash pit |
| | holding | _____ | other (specify) _____ |

Approximate gallons to hauler: _____

If Other: pre-approved SWERF No. _____

To the best of my knowledge, I declare under penalty of perjury that the material and quality of same as described above are accurate as documented on this manifest.

Hauler's signature

Date

Print name

Load Accepted By: _____
Date: _____
Time: _____
Quantity: _____

Load Rejected:
Reason: _____

Sample Analysis: Test: _____ **Results:** _____