



Town of Southborough
Board of Health
9 Cordaville Road, Lower Level
Southborough, MA 01772-1662

Phone: (508) 481-3013
Fax: (508) 229-2580

SEPTAGE PUMPER/HAULER'S LICENSE APPLICATION

Please note the fee amount has changed.

New Renewal FEE: \$175

Company Name _____

Company Address _____

Company Phone _____

If corporation or partnership, give names, titles and home addresses of officers.

1. _____

2. _____

3. _____

Authorized Signature _____ Date _____

The following information must be provided for each vehicle either pumping in Southborough or transporting septage through the Town. A copy of your Certificate of Insurance on each vehicle must be provided to this office.

Truck #1

Model _____ Year _____ Capacity _____ gallons

Vehicle Registration Number _____

Truck #2

Model _____ Year _____ Capacity _____ gallons

Vehicle Registration Number _____

Truck #3

Model _____ Year _____ Capacity _____ gallons

Vehicle Registration Number _____

(over)

I hereby declare that the above statements made on this application for a license to haul septage are complete and true and that non-compliance with the above may result in the revocation of my license.

Pursuant to MGL Ch. 62C, sec. 49A, I certify under penalties of perjury that I, to my best knowledge and belief, have filed all state tax returns and paid all state taxes required under law.

INSURANCE CERTIFICATES CAN BE EMAILED TO:
bspiri@southboroughma.com

Taxpayer Identification #

Applicant Signature

Date

FOR OFFICE USE ONLY

Fee _____ Check # _____

Permit Number _____ Date Issued _____

Notes: _____