



**CITY OF GRAND PRAIRIE  
ENVIRONMENTAL SERVICES DEPARTMENT  
APPLICATION FOR LIQUID WASTE TRANSPORTATION PERMIT**

Business Name: \_\_\_\_\_ TCEQ Registration No. \_\_\_\_\_

Address: \_\_\_\_\_ Business Telephone: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Email Address: \_\_\_\_\_

Name of Owner: \_\_\_\_\_ Home Telephone: \_\_\_\_\_

Manager of Operations: \_\_\_\_\_ Emergency Telephone: \_\_\_\_\_

Manager's Driver's License Number: \_\_\_\_\_ State: \_\_\_\_\_ DOB \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Parent Company Name, Texas Incorporation No., Address and phone (if applicable):  
\_\_\_\_\_  
\_\_\_\_\_

Provide the following information on each vehicle to be permitted:

Year	Make	Gallons	License No.	Vehicle ID #	Inspected By	Fee

(if addition space is needed, please attach separate sheet)

LIQUID WASTE TO BE TRANSPORTED: \_\_\_\_\_ Grease Trap \_\_\_\_\_ Grit Trap \_\_\_\_\_ Chemical Toilet \_\_\_\_\_ Septage

IDENTIFY PERMITTED DISPOSAL FACILITY(S) TO BE USED, AND LIST CONTACT PERSON, ADDRESS AND TELEPHONE

1 \_\_\_\_\_

2 \_\_\_\_\_

3 \_\_\_\_\_

I, the undersigned, hereby make application to transport liquid waste in the City of Grand Prairie, Texas, and declare to accept and abide by all pertinent ordinances and regulations in the City of Grand Prairie, Texas. I understand that falsification of any information submitted in the application shall be cause for termination of the liquid waste transportation permit, and that each permit shall be renewed on an annual basis.

\_\_\_\_\_  
SIGNATURE OF OWNER/MANAGER      DATE

\_\_\_\_\_  
SIGNATURE OF APPROVING AUTHORITY      DATE