



Application for Permit to Transport and Dispose of Liquid Domestic Waste

In accordance with subsection 7.2(1) of The Environmental Management and Protection Act (General) Regulations, I hereby apply for a Permit to Transport and Dispose of Liquid Domestic Waste:

1. Company Name: _____
2. Company Address (including postal code): _____

3. Office Telephone: _____ Office Facsimile: _____
4. Email address: _____
5. Applicant's Name: _____
Applicant's Telephone: _____

Services provided to the following areas or municipalities (please complete table below as applicable):

Name of Municipality in which sewage is collected (RM, Town, Business, etc.)	Name of Municipality in which disposal site is located (RM, Town etc.)	Disposal at Water Security Agency Approved Sewage System (X)	Disposal by Land spreading (X)

Please note: A permit will only cover municipalities listed, attach extra sheet where necessary.

Please complete the attached Liquid Domestic Waste Disposal Permission Form for each approved sewage lagoon or land spreading site where waste will or may be disposed of.

I certify that the applicant and his/her employees, agents and representatives will comply with the terms and conditions of any permits, directives or orders issued in accordance with this permit application.

I certify that the information contained in this application is true, complete, and accurate.

Signature

Date

Complete and submit to: Water Security Agency
 300 - 2365 Albert St.
 Regina, SK, S4P 4K1
 Phone: (306) 787-0913 Fax: (306) 787-0780
 Email: liquiddomesticwaste@wsask.ca