

**RECEIVING STATION USE PERMIT**

As required by Title 9, Chapter 9.08 Part 9 of the San Jose Municipal Code, application is made for a Receiving Station Use Permit to discharge septic tank cleanings in Receiving Station facilities at the San Jose/Santa Clara Water Pollution Control Plant Receiving Station.\*

The permit issued hereunder is personal to the applicant to whom it is issued and is not subject to transfer or assignment.

**\*Grease waste and hazardous wastes are not allowed under this permit.**

**This permit is subject to compliance with all applicable provisions of Part 2, Chapter 15.12 of the Municipal Code of the City of San Jose.**

Applicant (Company or Individual)	Address of Applicant
Person Filing this Application	Address
Name of Parent Company (if any)	Address of Parent Company

It is understood by me that all requirements of Chapter 9.08 Part 9 of the San Jose Municipal Code have all be met and complied with as provided therein.

Date of Application	Signature and Title of Applicant
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- Faithful Performance Bond in the amount of \$1,000.00 is on file with the Treasury Division, Finance Department, City of San Jose:  
Company Name of Insurer: \_\_\_\_\_  
Bond No. \_\_\_\_\_ Bond Date: \_\_\_\_\_  
City Clerk Bond Approval \_\_\_\_\_ Date \_\_\_\_\_  
Or Cash Deposit of \$1,000.00:  
Cash Receipt Number \_\_\_\_\_ Date \_\_\_\_\_

- Required Insurance: Commercial General Liability (1) Insuring Applicant for public liability and property damage (2) Insuring City of San Jose and City of Santa Clara as an "Additional Insured".  
Limits: Commercial General Liability - \$1, 000,000 per occurrence for bodily injury, personal injury and property damage. Automobile Liability - \$1,000.000 combined single limit per accident for bodily injury and property damage.

(1) \_\_\_\_\_  
Name of Insurer Policy Number Expiration Date

Insurance Approval \_\_\_\_\_ Date \_\_\_\_\_

- Copy of current health permit from Santa Clara County Health Dept to dispose of cleanings:  
Permit # \_\_\_\_\_ Verified by \_\_\_\_\_

- Business Tax Account Number \_\_\_\_\_ Expiration Date \_\_\_\_\_

All requirements of Ordinance 17785 having been met, the application for the above named company is approved and a Regulatory Permit with a one year expiration date has been issued.

Date	Senior Investigator/Collector
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