VERMONT
ENVIRONMENTAL CONSERVATION

Vermont Waste Transportation Vehicle Report

Return This Form To: **Waste Management Division, 103 South Main Street, Waterbury, VT 05671-0404**
Telephone: (802)241-3445 Fax: (802)244-5141

☐ New Application ☐ Annual Renewal ☐ Modification – Add A New Vehicle

This Vehicle Report Form Is Valid July 1, 2011 Through June 30, 2012

Name of Business: _____

Contact Name: _____ Phone Number: _____

Mailing Address: _____
Street City/Town State Zip

Waste(s) To Be Transported:
☐Solid ☐Tires ☐C&D ☐Scrap Metal ☐Medical ☐Hazardous ☐Biosolids ☐Septage
☐Wastewater Treatment Sludge

Do you transport solid waste, tires, medical waste, and/or sludge out-of-state for disposal? ☐Yes ☐No If YES, please identify the destination facility or facilities and submit a VT Dept of Taxes franchise tax form on a quarterly basis.

Please provide the following information for each vehicle to be included in your waste transporter permit.

1. Vehicle Make & Model: _____Color:_____Year: _____
   VIN:_____Registration #:_____State:_____

2. Vehicle Make & Model: _____Color:_____Year: _____
   VIN:_____Registration #:_____State:_____

3. Vehicle Make & Model: _____Color:_____Year: _____
   VIN:_____Registration #:_____State:_____

4. Vehicle Make & Model: _____Color:_____Year: _____
   VIN:_____Registration #:_____State:_____

5. Vehicle Make & Model: _____Color:_____Year: _____
   VIN:_____Registration #:_____State:_____

Applicant's Signature: _____ Date: _____

Fees: Hazardous Waste Haulers - $100.00 per truck, tractor, and/or trailer
Solid, Tires, Medical, Biosolids, Septage, Sludge - $35.00 per truck, tractor, and/or trailer
Payable to Treasurer, State of Vermont

Note: Forms may be copied and are available at: http://www.anr.state.vt.us/dec/wastediv/solid/transport.htm

---

For Department Use Only:

Date Rec'd:_____Date Complete:_____Fee Rec'd:$_____Approved By:_____