

AUTHORIZATION TO DISCHARGE SEPTAGE TO A WASTEWATER TREATMENT FACILITY

North Carolina Department of Environment and Natural Resources
Division of Waste Management- Solid Waste Section
1646 Mail Service Center, Raleigh, NC 2766-1646

Fee assessments and waste determinations will be required at the discretion of the wastewater treatment facility. The facility has the ultimate prerogative to deny discharges of any wastes to the incoming wastewater stream.

I, **Dennis M. Wilson Sr. Cert. # 12972**
(Plant operator in Responsible Charge (ORC) and ORC License Number)

1649 New Commerce Drive Oxford NC 27565
(Address)

919 -693-8783 do hereby authorize _____
(Phone Number) (Owner/Operator of Septage Management Firm)

of _____ **NCS#** _____
(Septage Management Firm Name and NCS number)

to dispose of: domestic septage X , portable toilet waste X ,
grease septage (grease trap pumping's) _____ commercial/industrial septage _____, from
Granville County
(County or other Geographic Area)

at the above named wastewater treatment facility. Septage shall be discharged at:
City Of Oxford Wastewater Treatment Plant Septic Receiving Station
(Location)

between the hours of **8: 00 Am thru 4:30 PM Monday - Friday**

Reintroducing partially treated liquid into a grease trap is acceptable Yes X **No**

This authorization shall be valid until _____
(Usually December 31, Year)

Signed _____ Date _____
(Facility Operator)

Sworn to and subscribed before me this _____ day of _____, 20_____

(Notary Public) My Commission expires: _____

(OFFICIAL SEAL)

Note: Falsification of this document by the septage management firm shall lead to permit revocation.