



State of Vermont  
 Agency of Natural Resources  
 Main Tel: # (802) 828-1138

Mail all completed applications to:

Department of Environmental Conservation  
 Waste Management & Prevention Division  
 Attn: Cheryl Hamilton  
 1 National Life Drive, Davis 1  
 Montpelier, VT 05620-3704  
 Telephone: (802) 522-5949  
 Email: Cheryl.Hamilton@vermont.gov

## VERMONT WASTE TRANSPORTATION VEHICLE REPORT FORM

This Vehicle Report Form is Valid – July 1, 2018 – June 30, 2019

### HAULER / TRANSPORTER CONTACT INFORMATION

You must download this form before completing it; information entered online will not be saved!

Corporation (In-state or Out-of-State), Ltd., Inc., Co., or LLC, = You must register your business with the Vermont Secretary of State's Corporation Division and apply the business name exactly the same on the line below (Name of Business), **or**

Trade-name, Partnership, Joint Venture, or Sole Proprietorship = You must list your business name as "doing business as" (dba), and apply to the line below. (e.g., John Smith dba John Smith's Rubbish Removal).

<b>Name of Business:</b>				
<b>Contact Name</b> (person):			<b>Title:</b>	
<b>Mailing Address:</b>			<b>City/Town:</b>	
<b>State:</b>	<b>Zip:</b>	<b>Phone:</b>	<b>Email Address:</b>	

**Check ONLY ONE** of the following boxes. Print, complete, and mail the application(s) that are listed in the box that you have checked below. All applications listed with a check mark below can be found at the following link: <http://dec.vermont.gov/waste-management/solid/waste-haulers>.

NEW PERMIT (required every 5 years).	ANNUAL RENEWAL (every yr.) Renewals due each year by May 1 <sup>st</sup>	MODIFICATION to add vehicles anytime
<input checked="" type="checkbox"/> 2018-2019 Vehicle Report Form	<input checked="" type="checkbox"/> 2018-2019 Vehicle Report Form	<input checked="" type="checkbox"/> 2018-2019 Vehicle Report Form
<input checked="" type="checkbox"/> Business Disclosure Statement	<input checked="" type="checkbox"/> Annual Renewal Statement	
<input checked="" type="checkbox"/> Personal History Disclosure(s)	<input checked="" type="checkbox"/> Supplemental Application (only if you haul hazardous waste)	
<input checked="" type="checkbox"/> Supplemental Application (only if you haul hazardous waste)		

**If you haul waste out-of-state:** Non-hazardous waste haulers transporting materials out-of-state for disposal must complete a Franchise Tax form and send it directly to the Department of Taxes on a quarterly basis, which can be found at the following link: <http://tax.vermont.gov/content/form-swt-608>. **VT Tax law requires that you also send the Agency of Natural Resources a "copy" of each completed Franchise Tax form.** Mail/email a copy to the address above.

### VEHICLE FEES

Vehicle Type	Description of Vehicle	Fee Per Vehicle	How many vehicles?	\$ Total Amount
Hazardous Waste	(Hazardous Waste) - For Each Hazardous Waste Vehicle, Regardless of Size	\$125.00		
2-Axle	(Non-Hazardous Waste) - For Each Pickup, Each Stake-Body, or Each Utility Trailer	\$50.00		
3 or 4-Axle	(Non-Hazardous Waste) - For Each Packer, Each Dump, Each Roll-Off, or Each Box Truck	\$75.00		
All Other Larger Type Vehicles	(Non-Hazardous Waste) - For Each Tractor, or Each Trailer. Each One Must Be Permitted.	\$100.00		
<b>Checks payable to: Treasurer, State of Vermont</b>		Total		

Check the boxes below indicating all wastes that you are transporting:

<b>HAZARDOUS WASTE:</b>	Hazardous Waste								
<b>RESIDUAL WASTE:</b>	Wastewater Treatment Sludge			<b>Septage:</b> If box is checked, you must also complete the following link, & include a fee. <a href="http://dec.vermont.gov/sites/dec/files/wmp/residual/RMSRptSEPTAGEFeePaymentForm.pdf">http://dec.vermont.gov/sites/dec/files/wmp/residual/RMSRptSEPTAGEFeePaymentForm.pdf</a>					
<b>SOLID WASTE:</b>	Bio-solids	C&D	Medical	Organics	Recyclables	Scrap Metal	Solid Waste	Tires	
Other waste, describe:									
List facilities you are hauling to, in-state and/or out-of-state:									

**Business Name:** \_\_\_\_\_

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

**VEHICLES PERMITTED**

1.	Vehicle Make, Model, Type:	# of Axles:	Color:	Year:	Hazardous Waste: Yes      No
	VIN#:	Registration#:		State:	
2.	Vehicle Make, Model, Type:	# of Axles:	Color:	Year:	Hazardous Waste: Yes      No
	VIN#:	Registration#:		State:	
3.	Vehicle Make, Model, Type:	# of Axles:	Color:	Year:	Hazardous Waste: Yes      No
	VIN#:	Registration#:		State:	
4.	Vehicle Make, Model, Type:	# of Axles:	Color:	Year:	Hazardous Waste: Yes      No
	VIN#:	Registration#:		State:	
5.	Vehicle Make, Model, Type:	# of Axles:	Color:	Year:	Hazardous Waste: Yes      No
	VIN#:	Registration#:		State:	
6.	Vehicle Make, Model, Type:	# of Axles:	Color:	Year:	Hazardous Waste: Yes      No
	VIN#:	Registration#:		State:	
7.	Vehicle Make, Model, Type:	# of Axles:	Color:	Year:	Hazardous Waste: Yes      No
	VIN#:	Registration#:		State:	
8.	Vehicle Make, Model, Type:	# of Axles:	Color:	Year:	Hazardous Waste: Yes      No
	VIN#:	Registration#:		State:	
9.	Vehicle Make, Model, Type:	# of Axles:	Color:	Year:	Hazardous Waste: Yes      No
	VIN#:	Registration#:		State:	
10.	Vehicle Make, Model, Type:	# of Axles:	Color:	Year:	Hazardous Waste: Yes      No
	VIN#:	Registration#:		State:	

**APPLICANT'S SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**To the best of my knowledge & belief, this application is true and accurate.**

**FOR DEPARTMENT USE ONLY – NOT VALID UNTIL APPROVED**

<b>Vehicle Report Form</b> received on:  <b>Date:</b> ___/___/20___	<b>Fee Amt. Rec'd.:</b> \$ _____ <b>Date:</b> ___/___/20___	<b>Processed check</b> <b>Date:</b> ___/___/20___ <b>Check#</b> _____	<b>Refund?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <b>How much</b> \$ _____	<b>Corporation</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <b>DBA</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Scanned & saved <input type="checkbox"/> Database updated <b>Date:</b> ___/___/20___	<b># of stickers</b> _____ <b>&amp; approved permit</b> <b>mailed to hauler on</b> <b>Date:</b> ___/___/20___
<ul style="list-style-type: none"> <li>• <b>Business Disclosure Rec'd</b>      Yes <input type="checkbox"/> No <input type="checkbox"/></li> <li>• <b>Personal History Rec'd</b>        Yes <input type="checkbox"/> No <input type="checkbox"/></li> <li>• <b>Supplemental Appl. Rec'd</b>      Yes <input type="checkbox"/> No <input type="checkbox"/></li> <li>• <b>Annual Statement Rec'd</b>        Yes <input type="checkbox"/> No <input type="checkbox"/></li> </ul>			<b>Incomplete, due to insufficient paperwork, or other reason:</b> _____ _____		<b>Approved by:</b> _____ <b>Date:</b> ___/___/20___	