



VERMONT

State of Vermont
 Department of Environmental Conservation
 Waste Management & Prevention Division
 One National Life Drive, Davis 1
 Montpelier, VT 05620-3704
 Tel: (802) 828-1138

ANNUAL STATEMENT

STATE OF _____)

COUNTY OF _____)

I, _____, hereby certify that the information
 (Print Name)

contained in the Personal History and Business Disclosure Forms that I previously submitted in support of an application for a Vermont Waste Transporter Permit contains no statement or information that I know to have changed, to be false, or to be incomplete, subsequent to my having submitted that disclosure statement. I am aware that if I have knowingly omitted or falsified any information required to be disclosed, processing of the application may be delayed, and the certification or permit sought by the application may be denied or subsequently revoked. Further, I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

BUSINESS NAME:	
TYPE OR PRINT NAME:	TYPE OR PRINT TITLE:

DO YOU HAVE ANY NEW PERSONNEL (Officers, Directors or Key Employees); OR ENVIRONMENTAL OR CRIMINAL VIOLATIONS TO REPORT? (please check yes or no below)	
<input type="checkbox"/> NO	"If you checked NO", please sign & date below.
<input type="checkbox"/> YES	"If you checked YES", do not sign below, and submit a complete revised <i>Business Disclosure Statement and Personal History Disclosure(s)</i>, which can be found at the following website: https://dec.vermont.gov/haulers

SIGNATURE: <i>Must be handwritten signature.</i>	DATE:
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You are expected to make diligent efforts to check your records, and other records or sources to which you have access, such as the corporate legal office, in order to answer the questions accurately and completely. Signing this statement, and failure to report any civil and/or administrative violations that you or your key employees have committed, or failure to report any changes in key personnel, may result in sanctions as provided by law. False statements can also result in permit delay, denial, or revocation.

NOTARY

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

Notary Public: _____

My commission expires: _____

Seal, or authority of notary: