



City of Coppell
Environmental Health Department
WASTE HAULERS PERMIT APPLICATION

P.O. Box 9478, Coppell, Texas 75019-4409 • 972-462-5177

Business Name _____ Phone # _____

Business Street Address _____

City _____ State _____ Zip Code _____ email _____

Primary Contact _____ Title _____ Phone _____

Alternate Contact _____ Title _____ Phone _____

Table with 4 columns: Vehicle Type, Vin #, License #, Capacity/Gallons. Contains 4 empty rows for data entry.

Waste Removed From: _____ Trap (Grease, Oil, Sand) (Check all that apply)

_____ Septic Tank _____ Waste Storage Tank _____ Chemical/Portable Toilet

Name, Address, & Phone # of Dumping Sites:

- 1. _____
2. _____
3. _____

I attest that the information provided above is true and accurate. I agree to comply with the City of Coppell rules and regulations and understand that failure to do so may result in revocation or suspension of the permit.

- The permit is effective for one year from the date of issuance unless sooner revoked for a cause.
• The permit is not transferable and the permit fees are non-refundable.
• Enclose a check or money order in the amount of \$100.00 payable to the City of Coppell. Additional vehicles are \$10.00 per vehicle.

Signature of Applicant _____

Date _____

Submit application and fee to City of Coppell, Environmental Health, P.O. Box 9478, Coppell, Texas 75019

OFFICE USE ONLY

Approved By _____ Date of Approval _____

Receipt No. _____ Check # _____ Amount \$ _____ Received By _____ Date _____