CITY OF HOUSTON

Houston Health Department
Consumer Health
7427 Park Place Blvd
Houston, Texas 77087
(832) 393-5740

2019 SOLID/SPECIAL WASTE TRANSPORTER PERMIT APPLICATION

Application Instructions for Transporters

Submit the following 10 items to our office:

- ☐ Payment
- ☐ Pg. 1 of the 2019 Solid/Special Transporter Application
- ☐ Section V Authorized Employee and Drivers Form
- ☐ Photo copies of drivers licenses for ALL owners, managers and drivers
- ☐ Waste Transportation Permit Bond $150,000 **or** Pollution Liability coverage of $1,000,000
- ☐ Evidence of financial responsibility for each vehicle and trailer (Insurance)
- ☐ Completed Vehicle Information Form
- ☐ Notarized Affidavit of Transporter Manager Acknowledgement
- ☐ Photocopy of the Texas Commission on Environmental Quality Sludge Authorization**Include copies of your sludge registration and disposal facility info page*
- ☐ Contact Naelah Yahya with ARA franchise to make sure you are in good standings

  Office: 832-393-8530 Email: Naelah.yahya@houstontx.gov

Mail or deliver applications:

City of Houston
HHD- Bureau of Consumer Health Services
7427 Park Place Blvd
Houston, TX 77087

Once your completed application is submitted the health officer will approve or deny your application. If application is approved they will contact you to schedule an appointment to inspect your equipment/vehicle and issue the decal if it passes inspection.

We accept checks, money orders or walk in credit card (Master Card, Visa or Discover)
Please make checks or money orders payable to: City of Houston
Payments are only valid for the current permitting year

Questions should be directed to:

Transporter Section **Office: 832.393.5704** **Email:** transporter@houstontx.gov

HOUSTON HEALTH DEPARTMENT

PERMIT INFORMATION

Annual permit is for a permitting year which starts February 1, 2019 – January 31, 2020

FEE SCHEDULE
(Fees are Subject to Change on January 1, 2019)

****Payments are only valid for the current permitting year****

Yearly Application Fee	$105.07 Application Fee + $29.18 Admin Fee = **$134.25**
Yearly Vehicle Fee	$741.36 Vehicle Fee + $29.18 Admin Fee = **$770.54**

Temporary permits are 31 day permits and cannot exceed 3 times per year

Temporary Application Fee	$52.53 Application Fee + $29.18 Admin Fee = **$81.71**
Temporary Vehicle Fee	$58.37 Vehicle Fee + $29.18 Admin Fee = **$87.55 per 31 days**

Transporter Annual Permit Formula:

OF VEHICLES_____x $770.54 VEHICLE FEE =_____+ $134.25 APPLICATION FEE = Grand Total $_____

Transporter Temporary Permit Formula:

31 DAY TEMP
OF VEHICLES_____X $87.55 VEHICLE FEE=_____+ $81.71 TEMP APPLICATION FEE= Grand Total $_____

62 DAY TEMP
OF VEHICLES_____X $175.10 VEHICLE FEE=_____+$81.71 TEMP APPLICATION FEE = Grand Total $_____

93 DAY TEMP
OF VEHICLES_____X $262.65 VEHICLE FEE=_____+$81.71 TEMP APPLICATION FEE = Grand Total $_____

This permit is for companies transporting any of the waste streams listed below that are generated within the city limits:

City-regulated waste: liquid, semi-liquid and solid wastes and wastewater removed from septic tanks used by single-family or multiple residential units, institutions or commercial establishments that primarily generate waste of a type associated with domestic use. It includes oily water, FOG, grease trap waste, sewage sludge, and portable toilet waste; as well as any materials collected in a septic tank, grit trap, lint trap, retention pond, utility service vault or any similar device, which materials result from or are incidental to any process of industrial, manufacturing, institutional or commercial operations including, but not limited to, mobile or stationary car or truck washing, pavement washing, environmental testing facilities and commercial laundries or Laundromats.

CITY OF HOUSTON

Houston Health Department- Consumer Health
7427 Park Place Blvd Houston, Texas 77087 (832) 393-5740
2019 SOLID/SPECIAL WASTE TRANSPORTER PERMIT APPLICATION

Section I TRANSPORTATION COMPANY INFORMATION			
Company Name	Telephone No.		Fax No
Physical Address	City	State	Zip
Mailing Address	City	State	Zip
Truck Address	City	State	Zip
Owner	DL No		Email
Transporter Manager	DL No		Email

Section II PREVIOUS PERMIT INFORMATION
Have you been permitted by the City of Houston to transport city regulated waste before? Is yes, what was the Previous Permit No?
Are there any other names this company is operating under? If so, list ALL names and permit numbers.

Section III STATE REQUIREMENT

TCEQ No (if applicable) _____ Types of Waste Registered: _____

Note: Vehicles hauling sludge waste (grease trap, sewage etc.) must have TCEQ Sludge Authorizations decals on vehicles at time of inspection

Section IV REQUIREMENTS AND CONDITIONS FOR ISSUANCE OF DECALS

Has the owner or transporter manager been convicted of any violations of this article or the solid waste laws in the past (3) years? (If yes, explain.)

Does your company have a current contract with the City of Houston Public Works Department? If yes, please provide contact name and phone number:

FOR OFFICE USE:
Permit Year 2019 □ **Walked in** □**Mailed**
Method of Payment: □ **Check** □ **Money Order** **Check/Money Order No.**_____**Pymt Form Serial No.**_**Fees: App Fee** **Vehicle Fee Amount** □ **Bond** □**Pol** □ **TCEQ** □ **ARA/Franchise Fee** □ **Notarized Affidavit** □ **TDL**

HOUSTON HEALTH DEPARTMENT

SECTION V AUTHORIZED EMPLOYEE (S) & DRIVERS

Include attachment if necessary ***Only individuals listed below are allowed to purchase manifest***

NAME	DRIVERS LICENSE NO.	DATE OF BIRTH

Section VI VEHICLE REGISTRATION

COMPLETE THE VEHICLE REGISTRATION FORM AND SUBMIT WITH APPLICATION

The health officer shall issue registration decals for a given vehicle only if each of the following conditions exist:

(1) The transporter holds a current and valid transporter permit, current ARA franchise agreement (if applicable), and the information contained on the vehicle's registration or title corresponds to the information given on the transporter's permit application or an amendment thereto.

(2) The transporter has paid the applicable vehicle registration and ARA franchise fees and makes the vehicle available to the health officer for verification.

(3) The transporter name and telephone number are placed on each sides of the vehicle(s) tractor or trailer and are at least three inches (3") high having a brush stroke width of at least 3/8 inch.

(4) The vehicle has a current state inspection sticker and current license registration. The vehicle is equipped with applicable State of Texas measurement device and discharge valve markings.

The holder of a transporter permit or temporary transporter permit shall have a continuing duty to AMEND their original permit application whenever there is a change in an item for which a representation or response was given by the transporter in its original application. Any such amendment shall be made within (15) days of the occurrence of the event making the amendment necessary. City Code, Section 47-439.

VEHICLE INFORMATION FORM

City Permit# _____

	City Truck#	Make	Model	Year	Tank Capacity Gallons	License Plate #	Vehicle Identification #
☐Truck							
☐Trailer							
☐Truck							
☐Trailer							
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☐Trailer							

Please provide vehicle information for both truck and trailer as a unit.

City Truck #: Vehicle # assigned to vehicle by City of Houston and can be located on decals or registration certificates.
Truck and Trailers: Please include information for both truck and trailer when applicable. If permitting truck only, please include VIN and license plate number for truck.
After the application is reviewed you will be contacted, and a time will be scheduled to bring your vehicles for vehicle inspection.

VEHICLES WILL NOT BE ACCEPTED FOR INSPECTION WITHOUT AN APPOINTMENT

HOUSTON HEALTH DEPARTMENT

Affidavit of Transporter Manager Acknowledgement

The information submitted in the transporter application is true, complete and accurate. I understand that submitting an incomplete or inaccurate application will result in the forfeiture of my application fee, and falsification of the information contained herein will result in the forfeiture of my Solid/Special Waste Transporter's permit. I acknowledge the receipt of the Transporter Fact Sheet and I understand that by signing this application I will be recognized as the responsible party and may receive all enforcement action.

Transporter Manager *(Responsible Person)*: _____
(Print)

Affiant _____
(Signature of Responsible Person)

Subscribe and sworn to before me by affiant this_____day of_____20_____.

NOTARY PUBLIC in and for THE STATE OF _____
Ink notary stamps only. No embossed stamps.

Notary Signature _____

My commission expires: _____

HOUSTON HEALTH DEPARTMENT

2019 Transporter Fact Sheet

***Training is available upon request for drivers and office staff. Please call 832-393-5704 to schedule an appointment.**

1. Special Waste transporter operating within the City limit of Houston must be permitted.

   - All trucks must be registered for the current permit year.
   - Current and valid registration decals from City Health and ARA departments must be visible and free from any obstruction.
   - City issued vehicle registration certificate for the current permit year must be present in the truck at all times.
   - In the event of an accident or vehicle malfunction, please contact and email transporter@houstontx.gov within (3) days and ***prior*** to submitting monthly report to avoid issues with monthly reporting of waste.
   - Only authorized employees & drivers listed on current application are allowed to purchase manifest.
   - All amendments to current application including disposal site location changes are required to be submitted within 15 days.

2. Waste transported within the City limits of Houston must be accompanied by a City of Houston (COH) approved issued Manifest only.

   - City of Houston issued manifest must be used for all waste originating within City limits of Houston.
   - Driver or operator must keep adequate amount of COH approved manifest on hand.
   - Manifest must be used in the numeric order that is issued by the City.
   - Manifest must be completed in blue or black ink only, right justified and free from any additional writing that is not required on manifest.
   - Include the top white copy ***ONLY*** of Scantron Manifest that has barcode.
   - All applied sections of manifests must be completed and signed by both the driver and the generator representative before leaving the site with the waste.
   - All manifests must be signed and date-stamped by the disposal site.

3. Portable toilet waste must be accounted for on a solid/special waste manifest. Use one manifest per truck per disposal.

4. All generators operating within the City limits of Houston are required to obtain a waste generator certificate/ permit.

   - The transporter is required to verify that the generator has a current and valid permitted before cleaning of the Interceptor(s).
   - Business name and address on the certificate/permit must be verified.
   - Business with a name change may not have trap cleaned until a new permit has been updated displaying the name change.
   - An email request for a business that does not have a TCEQ number or requires a ***one- time emergency pump out*** must be sent to Health official prior to cleaning. The email request should include name of business, address, contact name, telephone, and email address of generator. Please email request to transporter@houstontx.gov
     .

5. All domestic septic tanks & lift stations must have a City issued registration number before waste transporter can evacuate septic tank. Commercial septic tanks & lift stations must have a valid permit before the waste transporter cleans tank.

6. All traps must be cleaned to the bottom no skimming or dump back is allowed. All trap capacities must be verified. Any disputed capacity must be reported to the City of Houston Health Department at 7427 Park Place Blvd. (832) 393-5740. When the trap capacity exceeds the truck tank capacity, the balance of the trap waste must be removed within 24 hours of the initial cleaning.

7. Monthly report documenting all activities, manifests used and processing fee of $4.08 per manifest must be submitted by or on the 15th of each month. If the 15th is a holiday or weekend, the report must be submitted on the following work day. All permitted transporters are required to submit a report even when no work is done for that month. ***In the event, transporter has forgotten to submit all manifest for the monthly report, manifest must be submitted with the current report within (3) days. Do not submit manifest with the following monthly report. A COMPLETE MONTHLY REPORT INCLUDES THE FOLLOWING: MONTHLY REPORT FORM, FULL PAYMENT IN CHECK OR MONEY ORDER, AND MANIFEST. IN THE EVENT WE DO NOT RECIEVE A COMPLETED REPORT THE REPORT WILL BE RETURNED AND CONSIDERED LATE.***

8. Waste must be disposed of at the approved disposal site within four (4) days of pick up. Approved disposal sites are Type V Municipal Solid Special Waste facilities and or a Type II Municipal Landfill with solidification process. Any disposal site changes need to be submitted to our office prior to disposal at selected facility to avoid enforcement action.

HOUSTON HEALTH DEPARTMENT

Waste Transportation Permit Bond

Bond Number:

KNOW ALL MEN BY THESE PRESENTS:

That we_____as Principal and_____, as Surety, are held and firmly bound unto
The City of Houston in the penal sum of One Hundred Fifty Thousand Dollars ($150,000.00) (said sum representing the aggregate of five times the applicable per occurrence amount) in lawful money of the United States to be paid to the said City of Houston for which payment well and truly be made, we bind ourselves, and our heirs, executors and administrators jointly and severally be these presents.

WHEREAS the Principal has been issued a City of Houston Waste Regulated Transporter Permit pursuant to Article XI of Chapter 47 of the Code of Ordinances, Houston, Texas.

THE CONDITION OF THIS OBLIGATION IS SUCH THAT the Principal of the Surety will reimburse the City of Houston an amount not to exceed $30,000 per spill occurrence for the cleanup costs of any spill that may arise as a result of operations conducted under the Permit. If such payment is made within thirty days following demand, then this obligation shall be void, otherwise to remain in full force and effect. The Principal and the Surety expressly waive any requirement of notice prior to commencement of cleanup operation or the incurring costs therefore.

NOW THEREFORE, this bond shall be in effect all times during the Transporter permit term and shall expire January 31_____, but shall also be subject to one year renewal terms by continuation certificate issued by the Surety.

_____
Principal

By: _____
Title

_____
Surety

by: _____
Attorney in Fact

_____
Resident Agent

HOUSTON HEALTH DEPARTMENT

SAMPLE FOR CITY-REGULATED WASTE TRANSPORTERS

ACORD. CERTIFICATE OF INSURANCE

Issue Date (MM/DD/YY)

PRODUCER

ISSUERS OF POLICIES. THE ISSUER MUST HAVE A RATING OF AT LEAST B+ AND FINANCIAL SIZE OF CLASS VI OR BETTER ACCORDING TO THE CURRENT YEAR'S BEST RATING

THIS CERTIFICATE ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

COMPANIES AFFORDING COVERAGE

COMPANY A:

COMPANY B:

COMPANY C:

INSURED

SAMPLE FORM

COVERAGES

THIS IS TO CERTIFY THAT THE POLICES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED, NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN. THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

CO LTR.	TYPE OF INSURANCE	POLICY NUMBER	EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	POLICY LIMITS
A.	**General Liability** ☐ Commercial General Liability ☐ Claims Made ☐ Occur. ☐ Owners & Contractors Prot.			General Aggregate Products – Comp/Op Agg. Personal & Adv. Injury Each Occurrence Fire Damage (Any one fire) Med. Expense (Any one person)	$ $ $ $ $ $
A.	**Automobile Liability** ☒ Any Auto ☒ All Owned Autos ☐ Scheduled Autos ☐ Hired Autos ☐ Non-Owned Autos ☐ Garage Liability	Auto Liability Insurance including Owned, Non-owned, and Hired Auto coverage. (Any Auto coverage may be substituted for Owned, Non-owned and Hired Auto Coverage.) If Owned Auto coverage cannot be purchased by Transporter, Scheduled Auto coverage may be substituted for Owned Auto coverage. EACH AUTO USED IN PERFORMANCE OF TRANSPORTING MUST BE COVERED IN THE LIMITS SPECIFIED.		Combined Single Limit Bodily Injury (Per Person) Bodily Injury (Per Accident) Property Damage	$ 1,000,000 $ $ $
	Excess Liability			Each Occurrence Aggregate	$ $
	Woker's Compensation and Employee Liability	Statutory Limits		☐ **Statutory Limits** Each Accident Disease – Policy Limit Disease – Each Employee	 $ $ $
	Other				

DESCRIPTION OF OPERATION/LOCATIONS/VEHICLES/SPECIAL ITEMS

City of Houston is named as additional insured on Auto Liability policy. Broadened pollution liability coverage is provided on Autos. Material alteration on cancellation notice as shown below.
For (Transporter Name)

CERTIFICATE HOLDER

CITY OF HOUSTON / HOUSTON HEALTH DEPT.
ENVIRONMENTAL HEALTH DIVISION
7427 PARK PLACE
HOUSTON, TX 77087
MUST INCLUDE: 1. Transporter Name

MUST BE MODIFIED AS FOLLOWS:

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED, NON-RENEWED OR MATERIALLY ALTERED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUER WILL MAIL THIRTY (30) DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT

AUTHORIZED REPRESENTATIVE

HOUSTON HEALTH DEPARTMENT