

# Hauled Wastewater Disposal Manifest

**\*\* A FULLY COMPLETED MANIFEST MUST ACCOMPANY EACH LOAD \*\***

Company Name	RFID Number	Date	Time (24 hr)
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

License Plate Number	Tank Size (Liters)	Driver/Representative (please print)
<input type="text"/>	<input type="text"/>	<input type="text"/>

### WASTEWATER DESCRIPTION

Source		Volume (Liters)	Pickup Time	Wastewater Type
Resident/Company name and address				
1	Name Address			<input type="radio"/> Domestic <input type="radio"/> ICI* <input type="radio"/> Toilet Truck <input type="radio"/> Hydrovac
2	Name Address			<input type="radio"/> Domestic <input type="radio"/> ICI* <input type="radio"/> Toilet Truck <input type="radio"/> Hydrovac
3	Name Address			<input type="radio"/> Domestic <input type="radio"/> ICI* <input type="radio"/> Toilet Truck <input type="radio"/> Hydrovac
4	Name Address			<input type="radio"/> Domestic <input type="radio"/> ICI* <input type="radio"/> Toilet Truck <input type="radio"/> Hydrovac
5	Name Address			<input type="radio"/> Domestic <input type="radio"/> ICI* <input type="radio"/> Toilet Truck <input type="radio"/> Hydrovac

TOTAL ESTIMATED VOLUME (L)

DRIVER'S SIGNATURE

*Note: Only Septage and Hauled Wastewater that complies with the City of Kamloops Sanitary Sewer Bylaw No. 32-35 shall be disposed at the Kamloops Sewage Treatment Centre. Only Domestic wastewater can be deposited through the headworks receiving facility. Combined loads or distinct ICI/Toilet Trucks/Hydrovac loads must be deposited in Cell 1B.*

*\*ICI = Industrial, Commercial, Institutional*

*If this document is a hard copy, it is controlled and may not be the current version.*

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## WASTEWATER DESCRIPTION...continued

Source Resident/Company name and address		Volume (Liters)	Pickup Time	Wastewater Type
6	Name Address			<input type="checkbox"/> Domestic <input type="checkbox"/> ICI* <input type="checkbox"/> Toilet Truck <input type="checkbox"/> Hydrovac
7	Name Address			<input type="checkbox"/> Domestic <input type="checkbox"/> ICI* <input type="checkbox"/> Toilet Truck <input type="checkbox"/> Hydrovac
8	Name Address			<input type="checkbox"/> Domestic <input type="checkbox"/> ICI* <input type="checkbox"/> Toilet Truck <input type="checkbox"/> Hydrovac
9	Name Address			<input type="checkbox"/> Domestic <input type="checkbox"/> ICI* <input type="checkbox"/> Toilet Truck <input type="checkbox"/> Hydrovac
10	Name Address			<input type="checkbox"/> Domestic <input type="checkbox"/> ICI* <input type="checkbox"/> Toilet Truck <input type="checkbox"/> Hydrovac
11	Name Address			<input type="checkbox"/> Domestic <input type="checkbox"/> ICI* <input type="checkbox"/> Toilet Truck <input type="checkbox"/> Hydrovac
12	Name Address			<input type="checkbox"/> Domestic <input type="checkbox"/> ICI* <input type="checkbox"/> Toilet Truck <input type="checkbox"/> Hydrovac

TOTAL ESTIMATED VOLUME (L)

DRIVER'S SIGNATURE

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