CITY OF GREAT FALLS, MONTANA
TRUCKED AND HAULED WASTE MANIFEST

- Please print legibly.
- Complete all items in Part I, II and III.
- Submit the completed manifest to the Wastewater Treatment Plant Lab.

The City shall not allow the discharge of any trucked and hauled wastes to the POTW without a completed and signed Hauled Waste Manifest. Failure to provide a complete and accurate Hauled Waste Manifest shall result in suspension and/or revocation of the discharge permit, forfeiture of the performance bond and possible enforcement action by the City. City Ord. §13.12.090(B)(2)(e)

THE CITY ACCEPTS ONLY DOMESTIC SANITARY WASTES AS DEFINED BY CITY ORDINANCE WITH THIS MANIFEST. THE CITY DOES NOT ACCEPT INDUSTRIAL WASTES OR NON-DOMESTIC WASTES WITHOUT EXPRESS WRITTEN PERMISSION.

PART I

Transporter/Permittee:_____ **Permit #**_____
Driver Name:_____
Truck License #_____
Date of Disposal:_____ **Time:** _____ **am/pm** **Total Gallons:**_____

PART II

Waste Generator #1
Name:_____
Address:_____
Phone:_____
Date Pumped: _____
Gallons pumped:_____
Description of Waste: _____

Waste Generator #2
Name:_____
Address:_____
Phone:_____
Date Pumped: _____
Gallons pumped:_____
Description of Waste: _____

Waste Generator #3
Name:_____
Address:_____
Phone:_____
Date Pumped: _____
Gallons pumped:_____
Description of Waste: _____

Waste Generator #4
Name:_____
Address:_____
Phone:_____
Date Pumped: _____
Gallons pumped:_____
Description of Waste: _____

Waste Generator #5
Name:_____
Address:_____
Phone:_____
Date Pumped: _____
Gallons pumped:_____
Description of Waste: _____

Waste Generator #6
Name:_____
Address:_____
Phone:_____
Date Pumped: _____
Gallons pumped:_____
Description of Waste: _____

PART III

I certify under penalty of law that this manifest was prepared by me or under my direction or supervision. The information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations. I further certify that the wastes covered by this manifest are not hazardous as defined at 40 CFR Part 261. I further certify that all discharges made to the POTW are being made in accordance and in compliance with requirements specified in the applicable ordinance or rules and any issued permit, order, statement of requirements or other authorization to discharge.

_____	_____	_____
Printed Name	**Signature of Transporter**	**Date**