



# SAN BENITO COUNTY

HEALTH & HUMAN SERVICES AGENCY

TRACEY BELTON, DIRECTOR  
CHERYL SCOTT MD, MPH, PUBLIC HEALTH OFFICER

Environmental Health  
351 Tres Pinos Road, Ste. C-1  
Hollister, California 95023  
(831) 636-4035  
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## SEPTIC PUMPER'S PERMIT APPLICATION

**FEE: \$348.00 PER YEAR (PER VEHICLE)**

Owner's Name: \_\_\_\_\_

Company Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

Do you operate a septic tank pumper in San Benito County? \_\_\_\_ Yes \_\_\_\_ No

If yes, complete vehicle information section. If no, skip to signature.

### VEHICLE INFORMATION

Current Permit Number: \_\_\_\_\_ Vehicle License Number: \_\_\_\_\_

Make of Vehicle: \_\_\_\_\_ Year of Vehicle: \_\_\_\_\_

Model of Vehicle: \_\_\_\_\_ Tons: \_\_\_\_\_ Gallons: \_\_\_\_\_

OWNER'S SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**NOTE:** Quarterly pumping reports are to be submitted to this office by the 15th of the month following the end of that quarter. The report must include: customer's name, location of pump site, amount pumped, and date pumped. Septage holding tank-pumping reports shall be submitted on a monthly basis.

### OFFICE USE ONLY

Issue Date: \_\_\_\_\_ By: \_\_\_\_\_

Date Revoked: \_\_\_\_\_ By: \_\_\_\_\_

#### PUBLIC HEALTH SERVICES

351 Tres Pinos Road, Suite A-202  
Hollister CA 95023  
831-637-5367

#### ENVIRONMENTAL HEALTH

351 Tres Pinos Road, Suite C-1  
Hollister CA 95023  
831-636-4035

#### MEDICAL THERAPY UNIT

761 South Street Hollister  
CA 95023  
831-637-1989

#### HEALTH EDUCATION PROGRAMS

351 Tres Pinos Road, Suite  
A-202  
Hollister CA 95023  
831-637-5367