



# HAULED SEWAGE RECORD

ROADS AND PUBLIC WORKS DEPARTMENT

FORM WW-300  
Revision 1 May 2016

**Hauler must complete all of the following information (please print and use 1 sheet per truck disposal)**  
*"Failure to record the required information may result in suspension of disposal privileges"*

**REQUIRED INFORMATION:**

Hauling Company: \_\_\_\_\_ Disposal Date: \_\_\_\_\_ Disposal Time (HH:MM): \_\_\_\_\_  
 Hauler ID #: \_\_\_\_\_ Truck License Plate #: \_\_\_\_\_

SOURCE NAME	ADDRESS	DOMESTIC	NON DOMESTIC	VOLUME Imp Gallons	DESCRIPTION OF DISPOSAL
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

**Sample Bottle #** \_\_\_\_\_ **Total Volume:** \_\_\_\_\_

*I certify that the above source information is accurate and that the hauled sewage does not contain any hazardous materials prohibited by the Municipality of Mississippi Mills Sewer Use Bylaw:*

Driver's Name (please print): \_\_\_\_\_ Driver's Signature: \_\_\_\_\_

**FOR WASTEWATER PLANT STAFF USE ONLY**

System Operator Initials \_\_\_\_\_ pH \_\_\_\_\_ Sample Sent to Lab YES  NO