

**CATAWBA COUNTY UTILITIES AND ENGINEERING**

**Septage Management Firm Credit Application**

P.O. Box 389 Newton, North Carolina 28658

Office: (828) 465-8160 Fax: (828) 465-8392

Owner's Name \_\_\_\_\_ NCDL# \_\_\_\_\_

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

Physical Address (Required) \_\_\_\_\_

Business Name \_\_\_\_\_

Business Address \_\_\_\_\_

Phone Number ( ) \_\_\_\_\_ Mobile ( ) \_\_\_\_\_ Fax ( ) \_\_\_\_\_

State Permit NCS No. \_\_\_\_\_ County Permit No. \_\_\_\_\_

\*Social Security \_\_\_\_\_

\*Employer Identification Number (EIN) \_\_\_\_\_

\*The Social Security Number of the License Holder and/or Business Owner, or the Corporate EIN if applicable, will be used, in accordance with North Carolina General Statutes §132-1.10 and §105A-3, the Debt Setoff Clearinghouse Program, for the purpose of garnishment should any debt owed to Catawba County become delinquent. The disclosure of the Social Security Number is voluntary.

Name and phone number of individuals authorized to operate trucks:

Name \_\_\_\_\_ Phone \_\_\_\_\_

Print Name

\_\_\_\_\_ Phone \_\_\_\_\_

Print Name

\_\_\_\_\_ Phone \_\_\_\_\_

Print Name

- ♦ All Septage must be disposed of in Catawba County at either the Regional Sludge Management Facility or at one of the designated manhole dumping stations of the City of Hickory or City of Newton. **No other discharge points are approved.**
- ♦ A Pumpers Certification Form must be left with the plant operator at the time of disposal. Violations may result in the loss of Permit to Operate.
- ♦ A Septage Management Firm's Catawba County Permit will be revoked and may be reported to the State in the event an account becomes delinquent.

I certify that the information provided above is true, complete, and correct to the best of my knowledge and belief.

\_\_\_\_\_  
Owner/Manager

\_\_\_\_\_  
Date

**A bank reference and two (2) credit references are required or application will not be accepted.  
Fax numbers are also required.**

**BANK REFERENCE INFORMATION**

Name \_\_\_\_\_

Address (Mailing) \_\_\_\_\_

Contact Person \_\_\_\_\_

Phone Number ( ) \_\_\_\_\_ Fax Number ( ) \_\_\_\_\_

**\*\*REQUIRED\*\***

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**OFFICE USE**

NOTES: \_\_\_\_\_

**CREDIT REFERENCE INFORMATION**

(Banks cannot be used as credit references)

Name \_\_\_\_\_

Address (Mailing) \_\_\_\_\_

Contact Person \_\_\_\_\_

Phone Number ( ) \_\_\_\_\_ Fax Number ( ) \_\_\_\_\_

**\*\*REQUIRED\*\***

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**OFFICE USE**

NOTES: \_\_\_\_\_

**CREDIT REFERENCE INFORMATION**

Name \_\_\_\_\_

Address (Mailing) \_\_\_\_\_

Contact Person \_\_\_\_\_

Phone Number ( ) \_\_\_\_\_ Fax Number ( ) \_\_\_\_\_

**\*\*REQUIRED\*\***

.....  
**OFFICE USE**

NOTES: \_\_\_\_\_

\_\_\_\_\_

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Application Received By: \_\_\_\_\_ Date: \_\_\_\_\_

Credit reference letter sent on: \_\_\_\_\_ Re-sent on: \_\_\_\_\_

Approved or Disapproved: \_\_\_\_\_ By: \_\_\_\_\_ Date: \_\_\_\_\_

If disapproved, Reason: \_\_\_\_\_

\_\_\_\_\_

If disapproved, notified applicant in writing on: \_\_\_\_\_

Attached copy of letter

Account Number Assigned \_\_\_\_\_ By \_\_\_\_\_