

TOILET CLEANING MONTHLY REPORT

Company _____
Address _____
FA _____

Return to:
Kern County Environmental Health
Division
2700 "M" Street, Suite 300
Bakersfield, CA 93301
Office: (661) 862-8740
Fax: (661)862-8701
Email: eh@co.kern.ca.us

Month of _____ 20 _____

**MUST BE RECEIVED BY THE 15TH
OF THE FOLLOWING MONTH**

DISPOSAL DATE	DISPOSAL LOCATION	GALLONS DISPOSED

**I CERTIFY UNDER PENALTY OF PERJURY THAT
THE FORGOING IS TRUE AND CORRECT:**

OWNER/OPERATOR SIGNATURE DATE

PRINTED NAME OF PERSON SIGNING ABOVE