

VEHICLE STORAGE YARD APPROVAL

SEWAGE PUMPER/GREASE PUMPER/PORTABLE TOILET RENTAL BUSINESS VEHICLE AND TOILET STORAGE YARD

FOR STORAGE YARDS WITHIN KERN COUNTY *ONLY*

Owner: _____

Site Address: _____

Mailing Address: _____

Telephone: _____

Assessor's Parcel Number (APN): _____

Type of vehicle(s) being stored (check all that apply):

| | | | |
|--|--|---|-----------------------------|
| <input type="checkbox"/> Sewage Pumper | <input type="checkbox"/> Grease Pumper | <input type="checkbox"/> Portable Toilets | Number of Portable Toilets: |
|--|--|---|-----------------------------|

| | | | | |
|--|------------------------------|--------------------|--|-----------------------------|
| Do you plan to store pumped waste (septic waste, grease, portable toilet waste) on this property? | <input type="checkbox"/> Yes | Method of storage: | Has this method of storage been approved by your local Planning Department? | |
| | <input type="checkbox"/> No | | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

I hereby certify, to the best of my knowledge, that the information given on this Property Information form is true and correct. I grant permission to _____ for the purpose of storing sewage pumping vehicle(s) and or portable toilets on my property.

| | |
|-----------------------------|-------|
| Property Owner's Signature: | Date: |
| Printed Name: | |

| | | | |
|----------------------|------------------------------|------------------------------|-----------------------------|
| Date: | FOR OFFICIAL USE ONLY | | |
| Planning Zone: | Approved: | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Approved by (print): | Signature: | | |
| Comments: | | | |