



Registration for Water Haulers

Registration is hereby made for water hauler in: _____ County, WV.

1. Company: _____ Address: _____
2. Owner / Operator: _____ Address: _____
Telephone: _____ Cell Phone: _____ Fax: _____
E-mail address: _____

3. County(s) where customers will be located: _____

4. Vehicles: Total Number of Vehicles: _____ Carrier Tanks: _____
a. License Numbers: _____, _____, _____, _____, _____
b. All vehicles and carrier tanks marked with Company or Owner/Operator's name: Yes No

5. Carrier Tanks:
a. Capacity: Tank 1: _____, Tank 2 _____, Tank 3 _____, Tank 4 _____
b. Watertight: Yes No Fully Enclosed: Yes No
c. Filled by: Gravity Motor Driven Pump
d. Emptied by: Gravity Flow Motor Driven Pump
e. "DRINKING WATER ONLY" Marked On Tank: Yes No
f. Caps provided for valves and hoses: Yes No
g. Pump is self-priming: Yes No N/A
h. Hoses in good condition, approved construction (NSFpw): Yes No

6. All equipment maintained in good condition: Yes No
7. Water Source:
a. Public Water Source collected at the water treatment plant.
b. Public Water Source collected at _____

NOTE: Written permission secured from a responsible official of the entity owning or operating the water supplying facility. A copy of the document granting authorization to use the facility will accompany this application form.

Date: _____ Signature of Applicant/Agent: _____

FOR HEALTH DEPARTMENT USE ONLY

Inspection conducted on: _____ By: _____
Registration Completed: Yes No Date: _____ Number: _____
 Registration Suspended: Date: _____ Registration Revoked: Date: _____
 Registration Denied: Date: _____ Reason(s) _____