



CITY OF FORT STOCKTON LANDFILL
FORT STOCKTON, TX 79735
PHONE: 432-336-8525 FAX: 432-336-6273

2022 PERMIT APPLICATION

A complete Landfill Permit Application and Credit Application are enclosed. A permit is required for any firm that wishes to access the site. Firms that wish to access the site and establish a charge account will have to complete both the permit and credit sections of this package.

Permit Application Materials:

- | | |
|---|--------------------------------|
| 1. Permit Application (p. 2) | (complete, initial and return) |
| 2. Projected Waste Inputs (p. 3) | (complete, initial and return) |
| 3. Regulations Acknowledgement (p. 4) | (complete, initial and return) |
| 4. Landfill Policies (Billings & Payments) (p. 5) | (initial and return) |
| 5. Landfill Policies (Site Access & Waste Acceptance) (p. 6, 7) | (initial and return) |

Credit Application Materials:

- | | |
|--|--------------------------------|
| 6. Credit Application Fee Charge Form (p. 8) | (complete, initial and return) |
| 7. Credit Application Rider Form (p. 9) | (complete, initial and return) |

Return all submittals and fees to:

CITY OF FORT STOCKTON
ATTN: FINANCE DEPARTMENT – LANDFILL PERMIT
PO BOX 1000
FORT STOCKTON, TX 79735

Failure to satisfactorily complete any part of the permit application package, including initialing the bottom of each page, will result in the rejection of your application. Applications can also be rejected by not complying with Landfill Regulations.

You will be notified within 10 business days of the receipt of your application as to your approval status. Approval letters will include permit. If your permit is rejected, both the vehicle permit fee and deposit will be refunded.

Complete all relative pages and initial. Return original application to above; faxed copies are not acceptable.

Initial: _____

LANDFILL PERMIT APPLICATION: 2022
CITY OF FORT STOCKTON LANDFILL

NAME OF APPLICANT OR BUSINESS: _____

NAME OF RESPONSIBLE PARTY: _____

ADDRESS: _____

PHONE NO: _____ FAX NO: _____

SOCIAL SECURITY NO (if individual or sole proprietorship): _____

OR FEDERAL TAX ID NO (if business): _____

CITY OF FORT STOCKTON UTILITIES ACCOUNT NO: _____

If you do not have a Utilities Account please give us at least 3 credit references (Name, address, phone number and account number)

Exempt from sales tax ____ Yes ____ No

- Completed Credit Application packages have two options of payment:
 - (Option A) Two checks: 1) a \$50 nonrefundable processing fee, 2) a security deposit in the amount of \$500.

OR

 - (Option B) Two checks: 1) a \$50 nonrefundable processing fee, 2) a security deposit in the amount of \$100, 3) an **active credit card** with authority to charge delinquent payments.
- Security deposit will be held in escrow until the account is closed.
- Applicant must provide a current utility account number from the City of Fort Stockton. If applicant does not have a current utility account, a letter from a utility with which the customer has a current account should be attached to this form. This letter should indicate that the customer is in good standing with the utility.
- If applicant is exempt from sales tax, a copy of the exemption certificate must be attached.
- Credit at the landfill is a privilege extended by the City of Fort Stockton. All accounts will be billed monthly and are payable by the 20th day of the month. Delinquent accounts will be subject to revocation of Landfill privileges and surcharges/late penalties.
- All checks for payments should be made PAYABLE TO:

City of Fort Stockton

MAIL TO:

City of Fort Stockton

ATTN: Finance Department – Landfill Payment

PO Box 1000

Fort Stockton, TX 79735

Initial: _____

LANDFILL PERMIT APPLICATION: 2022
CITY OF FORT STOCKTON LANDFILL

PROJECTED WASTE INPUTS

MUNICIPAL SOLID WASTE (MSW): _____ %

CONSTRUCTION & DEMOLITION (C&D): _____ %

SLUDGE: _____ %

PETROLEUM CONTAMINATED SOIL (PCS): _____ %

ALTERNATIVE DAILY COVER (ADC): _____ %

ARE YOU A GENERATOR OF SPECIAL WASTE? Y _____ N _____

APPROXIMATE AMOUNT OF WASTE TO BE BROUGHT TO THE LANDFILL IN TONS _____ PER MONTH.

PLEASE BRIEFLY DESCRIBE THE TYPE OF WASTE YOU EXPECT TO BRING TO THE CITY OF FORT STOCKTON LANDFILL (EX. HOUSEHOLD, OFFICE REFUSE, INDUSTRIAL WASTE, SPECIAL WASTE, CONSTRUCTION MATERIALS, ETC.)

Initial: _____

LANDFILL PERMIT APPLICATION: 2022
CITY OF FORT STOCKTON LANDFILL
REGULATIONS ACKNOWLEDGEMENT

I ACKNOWLEDGE THAT I HAVE RECEIVED AND REVIEWED A CURRENT COPY OF THE CITY OF FORT STOCKTON LANDFILL REGULATIONS AS WELL AS ANY OTHER LAWS OR REGULATIONS REGARDING THE USE OF THIS FACILITY. I AGREE THAT THE TERMS, CONDITIONS, POLICIES AND REGULATIONS APPLY TO ANY INDIVIDUAL WITHIN THIS FIRM AND ANY OTHER AGENT AND/OR SUBCONTRACTOR WORKING ON MY BEHALF. FURTHERMORE, I ACKNOWLEDGE RECEIPT OF AND AGREE TO THE TERMS AND CONDITIONS IN THE ATTACHED RIDER.

SIGNATURE: _____

DATE: _____

PRINT OR TYPE NAME: _____

I HEREBY PERSONALLY GUARANTEE PAYMENT OF ANY SUMS OF MONEY DUE UNDER THIS AGREEMENT. (IF THIS IS AN APPLICATION MADE ON BEHALF OF A CORPORATION, THE SIGNATURE BELOW MUST BE OF A CORPORATE OFFICER)

SIGNATURE: _____

DATE: _____

PRINT OR TYPE NAME: _____

Initial: _____

LANDFILL PERMIT APPLICATION: 2022
CITY OF FORT STOCKTON LANDFILL

CITY OF FORT STOCKTON LANDFILL POLICIES

THE FOLLOWING POLICIES WILL APPLY TO BOTH YOUR FIRM, OR AGENTS AND SUBCONTRACTORS:

BILLINGS & PAYMENTS

1. PAYMENT FOR TIP FEES MAY BE MADE IN ONE OF TWO WAYS: CHECKS MADE PAYABLE TO THE CITY OF FORT STOCKTON AT THE TIME OF THE TRANSACTION OR VIA THE ESTABLISHMENT OF A CHARGE ACCOUNT.
2. BILLS LARGER THAN \$20.00 ARE NOT ALLOWED.
3. PERMITTED FIRMS MAY NOT AUTHORIZE A SECOND PARTY TO USE THEIR ACCOUNT.
4. FIRMS WITH MULTIPLE DIVISIONS MAY NOT ESTABLISH MULTIPLE ACCOUNTS.
5. BILLING DISPUTES WILL BE MADE IN WRITING AND DIRECTED TO THE CITY OF FORT STOCKTON FINANCE DIRECTOR.
6. STORED TARE WEIGHTS WILL BE CONFIRMED TWICE PER YEAR. DISPUTES OVER VEHICLE TARE WEIGHTS WILL BE MADE AT THE TIME OF TRANSACTION.
7. CHECKS RETURNED FOR INSUFFICIENT FUNDS WILL RESULT IN THE IMMEDIATE LOSS OF TIPPING PRIVILEGES. THE HAULER WILL INSURE THAT A REPLACEMENT CHECK IS IN PLACE PRIOR TO ACCESSING THE FACILITY.
8. LOADS DELIVERED VIA A THIRD PARTY WILL BE ACCOMPANIED BY A BILL OF LADING.

LANDFILL PERMIT APPLICATION: 2022
CITY OF FORT STOCKTON LANDFILL

CITY OF FORT STOCKTON LANDFILL POLICIES

THE FOLLOWING POLICIES WILL APPLY TO BOTH YOUR FIRM, OR AGENTS AND SUBCONTRACTORS:

SITE ACCESS

1. ALL INDIVIDUALS WILL CHECK INTO THE SCALEHOUSE PRIOR TO ACCESSING THE SITE.
2. ALL LOADS WILL BE TARPED. ALL LOADS WILL BE UNTARPED IN THE LANDFILL. DRIVERS THAT UNTARP OR UN-LOAD IN AREAS NOT DESIGNATED BY THE CITY WILL BE BARRED FROM THE SITE.
3. ALL VEHICLES ACCESSING THE LANDFILL WILL HAVE TOW HOOKS FIRMLY AFFIXED TO THE FRONT AND REAR OF EACH VEHICLE. THE CITY DOES PROVIDE ASSISTANCE AT THE REQUEST OF DRIVERS. **THE CITY DOES NOT ASSUME RESPONSIBILITY FOR DAMAGE TO VEHICLES OR EQUIPMENT.**
4. CUSTOMERS ARE TO USE EXTREME CAUTION WHILE ON SITE; UNSAFE DRIVERS WILL BE BARRED FROM THE SITE.
5. THE SITE SPEED LIMIT IS **10 MPH.**
6. FOR SAFETY REASONS, PASSENGER VEHICLES ARE NOT PERMITTED IN THE LANDFILL.
7. PERMIT HOLDER RECOGNIZES THE INHERIT DANGERS OF ENTERING A LANDFILL. THE PERMIT HOLDER ASSUMES RESPONSIBILITY FOR DEVELOPING AND ENFORCING A HEALTH AND SAFETY PLAN FOR THEIR EMPLOYEES.

WASTE ACCEPTANCE POLICIES

1. THE CITY RESERVES THE RIGHT TO REFUSE ACCEPTANCE FOR MATERIALS THAT REQUIRE PRE-APPROVAL.
2. THE CITY RESERVES THE RIGHT TO REJECT WASTE THAT WILL CAUSE PROBLEMS IN MAINTAINING FULL AND CONTINUOUS COMPLIANCE WITH THE FEDERAL OR STATE STATUTES OR REGULATIONS.
3. ACCEPTANCE OF CONTAMINATED SOIL IS SUBJECT TO PRE-APPROVAL AND ON AN APPOINTMENT BASIS ONLY.
4. THE CITY RESERVES THE RIGHT TO DEMAND ANALYTICAL TESTING FOR MATERIALS THAT, BY THEIR NATURE, ARE NOT EASILY IDENTIFIABLE OR ARE FROM A SPECIFIC GENERATOR.

Initial: _____

LANDFILL PERMIT APPLICATION: 2022
CITY OF FORT STOCKTON LANDFILL

CITY OF FORT STOCKTON LANDFILL POLICIES

THE FOLLOWING POLICIES WILL APPLY TO BOTH YOUR FIRM, OR AGENTS AND SUBCONTRACTORS:

WASTE ACCEPTANCE POLICIES (continued)

5. A COMPLETED WASTE PROFILE FORM IS REQUIRED FOR WASTES THAT ARE NOT EASILY IDENTIFIABLE OR ARE FROM A SPECIFIC GENERATOR.
6. SHOULD THE CHARACTERISTICS OF THE WASTE DIFFER FROM THOSE INDICATED BY THE WASTE PROFILE FORM OR SHOULD THE CHARACTERISTICS OF THE WASTE CHANGE, THE CITY RESERVES THE RIGHT TO ALTER THE PRICING STRUCTURE FOR THE WASTE OR REFUSE THE WASTE.
7. SHOULD A LOT NUMBER BE ASSIGNED BY THE CITY FOR A SPECIFIC WASTE STREAM, THE HAULER WILL PROVIDE A BILL OF LADING WITH THAT LOT NUMBER CLEARLY INDICATED.

CREDIT APPLICATION: 2022
CITY OF FORT STOCKTON LANDFILL

CREDIT APPLICATION CHARGE FORM

Option A

I AGREE TO BE LIABLE FOR: 1) THE ANNUAL \$50 LANDFILL CREDIT APPLICATION FEE, 2) THE \$500 SECURITY DEPOSIT. I UNDERSTAND THAT APPLICATION FEES ARE NOT REFUNDABLE NOR ARE PERMITS TRANSFERRABLE. IN ADDITION, I AM AWARE ALL LANDFILL CHARGES WILL APPEAR ON MY MONTHLY STATEMENT AND IF THESE CHARGES ARE NOT PAID BY THE 20TH DAY OF THE BILLING MONTH, THE ABOVE PERMITS MAY BE REVOKED.

SIGNATURE: _____

DATE: _____

PRINT OR TYPE: _____

Option B

I AGREE TO BE LIABLE FOR: 1) THE ANNUAL \$50 LANDFILL CREDIT APPLICATION FEE, 2) THE \$100 SECURITY DEPOSIT, 3) AND ANY CHARGES MADE TO COVER DELINQUENT PAYMENTS CHARGED TO SUBMITTED CREDIT CARD AS SPECIFIED ON PAGE 2 OF THIS AGREEMENT. I UNDERSTAND THAT APPLICATION FEES ARE NOT REFUNDABLE NOR ARE PERMITS TRANSFERRABLE. IN ADDITION, I AM AWARE ALL LANDFILL CHARGES WILL APPEAR ON MY MONTHLY STATEMENT AND IF THESE CHARGES ARE NOT PAID BY THE 20TH DAY OF THE BILLING MONTH, THE ABOVE PERMITS MAY BE REVOKED WITH CHARGES BEING MADE TO CREDIT CARD.

SIGNATURE: _____

DATE: _____

PRINT OR TYPE: _____

NOTE: CHARGES AND PAYMENTS WILL APPEAR ON YOUR MONTHLY STATEMENT

Initial: _____

CREDIT APPLICATION: 2022
CITY OF FORT STOCKTON LANDFILL

I AGREE TO BE LIABLE FOR ALL LATE CHARGES AT A RATE OF 10% OF BALANCE FOR ALL CHARGES CREDITED TO THIS ACCOUNT FOR MORE THAN 30 DAYS. I UNDERSTAND THAT ALTERNATE PAYMENT TERMS MAY BE ENFORCED DUE TO NONPAYMENT, POOR CREDIT RATING OR IN THE CASE OF A NEW CUSTOMER.

I UNDERSTAND THAT FAILURE TO REMIT ALL CHARGES CREDITED TO MY LANDFILL ACCOUNT IN EXCESS OF SIXTY (60) DAYS WILL RESULT IN REVOCATION OF THIS PERMIT.

IN THE EVENT OF ANY DISPUTE REGARDING THIS ACCOUNT, INCLUDING BUT LIMITED TO FAILURE TO PAY AN INVOICE ON TIME, I AGREE THAT A LAWSUIT MAY BE COMMENCED BY CERTIFIED MAIL, RETURN RECEIPT REQUESTED AT THE ADDRESS LISTED IN THE APPLICATION FORM AND THAT A SERVICE OF A SUMMONS AND OR COMPLAINT BY SUCH METHOD SHALL CONSTITUTE GOOD AND PROPER SERVICE OF PROCESS OR ANY OTHER LAWFUL MEANS.

COMPANY NAME: _____

SIGNATURE: _____

DATE: _____

PRINT OR TYPE NAME: _____



City of Fort Stockton Credit Card Authorization Form

(Do not write in this space)

Check Credit Card Type



Name/Entity on Credit Card: _____

Billing Address: _____

Credit Card Number: _____

Expiration Date: Month: _____ Year: _____

Billing Zip Code: _____

I authorize the City of Fort Stockton to charge my credit card for the products/services indicated on the enclosed form.

Signature: _____ Date: _____

Directions:

1. Fill out this form electronically or print and manually fill out
2. Ensure that the required information is complete
 - Type of credit card being used
 - Name/entity of the credit card holder
 - Billing Address of the credit card
 - 16 digit credit card number
 - Expiration month and year of the credit card
 - Billing Zip Code of the credit card
 - Signature of the card holder
 - Date of the authorization
3. Return this completed Credit Card Authorization Form with the completed application form to the address shown on the application form.