



**Michigan Department of Environmental Quality
Water Bureau**

Continuing Septage Education Reimbursement Request

Form must be completed and submitted by the septage firm owner to request a reimbursement for continuing septage education as required under Part 117, Septage Waste Servicers, of the Natural Resources and Environmental Protection Act, 1994 PA 451, as amended.

REIMBURSEMENT INFORMATION

| | | | |
|----------------------------|--------|-------------------|-----|
| BUSINESS NAME | | FEDERAL ID | |
| MAILING ADDRESS | CITY | STATE | ZIP |
| DEQ SEPTAGE LICENSE NUMBER | COUNTY | DAYTIME PHONE NO. | |

COURSE INFORMATION

| | | |
|---|-----------------|-------------|
| NAME OF RESPONSIBLE AGENT WHO ATTENDED COURSE (PRINT NAME) | | |
| COURSE ATTENDED | COURSE LOCATION | COURSE DATE |
| COURSE PRESENTER(S) | | |
| COURSE FEE AMOUNT TO BE REIMBURSED | | |
| \$ COURSE FEE ONLY – NO ADDITIONAL COSTS WILL BE REIMBURSED | | |

SEPTAGE FIRM OWNER: _____ **DATE:** _____
(signature)

PRINT NAME: _____
(printed name for signature above)

SUBMIT COMPLETED FORM, RECEIPT, AND PROOF OF COURSE COMPLETION TO:

MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY
WATER BUREAU-DWEHS
SEPTAGE WASTE PROGRAM
PO BOX 30273
LANSING, MI 48909-7773

| | |
|------------------------------------|--------------------|
| DEQ USE ONLY: | |
| WATER BUREAU APPROVAL _____ | DATE: _____ |
| <i>(SIGNATURE)</i> | |