MICHIGAN DEPARTMENT OF ENVIRONMENT, GREAT LAKES, AND ENERGY
DRINKING WATER AND ENVIRONMENTAL HEALTH DIVISION

EGLE

APPLICATION FOR LICENSE TO HAUL WATER FOR DRINKING OR HOUSEHOLD PURPOSES IN ACCORDANCE WITH ACT 1976 PA 399

COMPLETION OF THIS APPLICATION IS MANDATORY TO OBTAIN A WATER HAULING LICENSE

APPLICANT – DO NOT WRITE IN THIS SPACE

HAULER LICENSE NO. | DATE ISSUED

APPLICATION REVIEWED BY:

PLEASE TYPE OR PRINT IN INK. COMPLETE ALL SECTIONS AND SIGN.

1. NAME OF BUSINESS		
2. NAME OF OWNER/FIRM REPRESENTATIVE	TITLE/POSITION	
3. BUSINESS ADDRESS	CITY	STATE
4. BUSINESS TELEPHONE (AREA CODE & NUMBER)	COUNTY	ZIP
5. LIST MICHIGAN COUNTIES SERVED		
6. SOURCE OF WATER TO BE HAULED ☐ MUNICIPAL ☐ WELL ☐ OTHER: _____	7. NAME (IF MUNICIPAL)	
8. OWNER OF SOURCE(S)	9. ADDRESS OF SOURCE(S)	

10. LIST CUSTOMERS WHICH ARE NOT PRIVATE RESIDENCES

ESTABLISHMENT NAME	STREET ADDRESS	CITY OR TOWNSHIP

New Transportation Tanks: Complete a Section for Each Unlicensed Tank in Operation			
12. DO NOT WRITE IN THIS SPACE ⏭ ⏭ ⏭ ⏭ ⏭ ⏭ ⏭ ⏭ ⏭ ⏭ ⏭ ⏭ ⏭ ⏭ ⏭ ⏭			License No.
A. Tank Capacity _____ Gallons	B. Materials (stainless steel, plastic, etc.)		
COMPLETE ONLY ONE OF QUESTIONS C, D, OR E			
C. Truck Mounted ☐ Yes	Truck Make	Year	D. Trailer Mounted ☐ Yes
E. Other ☐ Description			
13. DO NOT WRITE IN THIS SPACE ⏭ ⏭ ⏭ ⏭ ⏭ ⏭ ⏭ ⏭ ⏭ ⏭ ⏭ ⏭ ⏭ ⏭ ⏭ ⏭			License No.
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C. Truck Mounted ☐ Yes	Truck Make	Year	D. Trailer Mounted ☐ Yes
E. Other ☐ Description			
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COMPLETE ONLY ONE OF QUESTIONS C, D, OR E			
C. Truck Mounted ☐ Yes	Truck Make	Year	D. Trailer Mounted ☐ Yes
E. Other ☐ Description			

If additional tanks are being operated, use page 2 of an additional application form.

Michigan Department of Environment, Great Lakes, and Energy
Drinking Water and Environmental Health Division
EHS - Noncommunity Water Supplies Unit
P.O. Box 30817
Lansing, Michigan 48909-8311

Applicant's Statement:

I certify that all information provided in this application is true and complete and that the transport of bulk water for drinking and household purposes will be done in accordance with Act 1976 PA 399.

_____ _____
Signature (authorized representative) Date

_____ Title (i.e., president, owner, other)