



COMMONWEALTH of VIRGINIA

Fauquier County Health Department

Environmental Health

330 HOSPITAL DR.

WARRENTON, VIRGINIA 20186

IN COOPERATION WITH THE
STATE DEPARTMENT OF HEALTH

(540) 347-6363

Sewage Handlers working in Fauquier County

In addition to holding a DPOR Operators license, sewage handlers who pump out septic tanks within, or otherwise haul sewage through or within Fauquier County, must also have a Fauquier County Sewage Handling Permit, in accordance with Fauquier County Code 17-13. Licenses shall be renewed annually between January 1 and January 15 of each year.

Applications must include payment to the Fauquier County Health Department, in the amount of \$400.00 for first truck plus \$150.00 for each additional truck you will utilize in Fauquier County.

Your application submittal must also include a signed authorization from the owner of the receiving Sewage Treatment Plant where you intend to dispose your loads.

After we have completed review of your application, we will call and arrange a meeting to inspect your truck(s), to assure compliance with applicable regulations.

Fauquier County Health Department

Environmental Health

Phone: 540-347-6363

Fax: 540-347-6373



COMMONWEALTH OF VIRGINIA

Rappahannock-Rapidan Health District
Fauquier Environmental Health
330 Hospital Drive
Warrenton, Virginia 20186
(540) 347-6363 FAX (540) 347-6373

Application for Sewage Handling Permit

Business Name _____ Owner Name _____

Business Address _____ Owner Address _____

Business Telephone _____ Owner Telephone _____

Business Email _____

Area(s) to be Served _____

City/County

DPOR Operator(s) Name & License# _____ Alt Conv

Alt Conv

Alt Conv

Vehicle	Make	Model	State License Number	Health Dept. Identification Number	Vehicle Tank Size (Gal)
1					
2					
3					
4					
5					

Name and location of Sewage Treatment Plant receiving sewage _____

Enclose a letter from the owner of the receiving Sewage Treatment Plant authorizing your disposal at that site.

Department Use

- 1) Approved Sewage Treatment Plant Yes No
- 2) Statement from Sewage Treatment Plant owner authorizing use Yes No
- 3) Sewage Treatment Plant Inspected Yes No Date _____

Comments _____

Vehicle	Tank		Pump	Valves		Hoses		Other Comments
	Water-tight	Secured	Water-tight	Water-tight	Capped	Water-tight	Properly Stored	
1								
2								
3								
4								
5								

Comments _____

Permit Authorized Yes No _____

EHS

Date