



Department of Public Works

650 W. Winchester Road
Libertyville, Illinois 60048
Phone 847 377 7500
Fax 847 984 5665
PublicWorks@lakecountyil.gov

Drying Bed Permit Application Form 2 Waste Hauler Information

Name of Waste Hauling Co _____

Company Owner/President _____

Company Mailing Address _____

Contact Name _____

Telephone _____

Email Address _____

Number of Vehicles _____

Is this company a subcontractor working under the disposal permit of another agency? Yes No

If yes, what is the name of the permitted agency? _____

I, _____ (owner/president), acknowledge that the above-named company may dispose of only approved waste at the Mill Creek Water Reclamation Facility (WRF) under requirements of the Lake County Public Works Department (LCPW) Waste Disposal Permit. Furthermore, I understand that disposal of unauthorized waste at the WRF, whether by me, by one of my employees, or by a subcontractor of my company, may result in the assessment of fines and/or the revocation of the subject Waste Disposal Permit.

Signature – Owner/President

Date