



Department of Public Works

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## Waste Hauler Application Form Septic Receiving Program

1. Name of Company: \_\_\_\_\_
2. Owner/President of Company: \_\_\_\_\_
3. Mailing Address: \_\_\_\_\_  
\_\_\_\_\_
4. Billing Address: \_\_\_\_\_  
\_\_\_\_\_
5. Phone Number: \_\_\_\_\_
6. Fax Number: \_\_\_\_\_
7. Email Address: \_\_\_\_\_

I \_\_\_\_\_ (legal agent/owner/president) acknowledge that I will only dispose of waste materials at the Mill Creek Plant as required by Lake County Department of Public Works. Furthermore, I agree, that if I, one of my drivers, a paid contractor, or any other employee of said company dump unacceptable waste materials, that my company may be assessed fines including possible termination of my company's disposal permit, subject to review by the administration of Lake County Department of Public Works. I also understand that I am responsible for being compliant with all applicable State, Local, and Federal regulations relative to the transportation and dumping of waste material.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_