

St. George Regional Water Reclamation Facility  
Wastehauler Manifest Tracking Form  
Emergency Phone Number (435) 703-1162

Food Truck Information

Food Truck Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Truck: \_\_\_\_\_ Model: \_\_\_\_\_ License Plate: \_\_\_\_\_  
Tank Capacity (Gallons) \_\_\_\_\_ Health Permit No: \_\_\_\_\_

City Waste Obtained From: \_\_\_\_\_

Date(s) Obtained: \_\_\_\_\_

Gallons: \_\_\_\_\_

Waste Type: Commercial (Grease Trap Gray Water)  \_\_\_\_\_

I Certify to the best of my knowledge that the information on this manifest is correct and that the only waste contained in this vehicle is what is specified on this wastehauler manifest tracking form and that it contains no hazardous material

\_\_\_\_\_  
Driver Name (Print) Driver Signature

Driver License Number: \_\_\_\_\_

POTW Information

Date In: \_\_\_\_\_ Time In: \_\_\_\_\_

Gallons Disposed = \_\_\_\_\_ Gallons

To be Surcharged: Yes \_\_\_\_\_ No \_\_\_\_\_ Reason: (check below)

After Hours Charge \_\_\_\_\_ Clean-Up \_\_\_\_\_

Other \_\_\_\_\_

Notes: \_\_\_\_\_

I Certify That I Have Disposed Of The Waste On This Manifest In Accordance With All City, State And Federal Laws.

\_\_\_\_\_  
Print Operators Name Operators Signature