

**HOLDING TANK PUMPER AGREEMENT  
PROPERTY OWNER STATEMENT**

Department Human Services  
Division of Health Engineering  
Station #10, State House  
Augusta, ME 04333

**HOLDING TANK PUMPER**

General Information

Name of Business \_\_\_\_\_ Telephone \_\_\_\_\_

Business Address \_\_\_\_\_

Maximum Capacity of tank truck \_\_\_\_\_ gallons

Wastes can be pumped and disposed of:  all year round  
(check one)  limited to \_\_\_\_\_ to \_\_\_\_\_  
Month Month

Wastes will be disposed of at the following Department of Environmental Protection licensed site(s).

Location of site(s): \_\_\_\_\_  
or facility \_\_\_\_\_

Agreement

I \_\_\_\_\_, while under contract, will be responsible for the pumping and maintenance of the  
Pumper owner  
holding tank on the property of \_\_\_\_\_, located at \_\_\_\_\_  
Property owner

Property's Address

on the  year round,  seasonal basis

Pumper / Property Owner Contract

I, \_\_\_\_\_, agree to pump and maintain the holding tank for \_\_\_\_\_, located at  
Pumper owner Property owner

Property Address

for the contract period of \_\_\_\_\_ to \_\_\_\_\_ with a new contract contingent upon the following  
month/year month/year

factor's list (dumping site accessibility, costs, etc.)

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

New Agreement / Contract Form

A copy shall be completed at the expiration of this contract and forwarded to the Department for its records. If this is not received by the Department, the Department's original Approval becomes nul and void and therefore, a violation of the Rules.

Property Owner's Signature \_\_\_\_\_ Date \_\_\_\_\_

Pumper Proprieter's Signature \_\_\_\_\_ Date \_\_\_\_\_

(over)

HHE-230 RV7/80

# PROPERTY OWNER

I, \_\_\_\_\_ am the owner of \_\_\_\_\_ located at \_\_\_\_\_  
Property owner  
\_\_\_\_\_  
(street) (town)

This facility  was constructed  
 was subdivided on or before \_\_\_\_\_  
 is proposed

The usage of this facility  has been;  will be: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

since \_\_\_\_\_ (date).  
(Example: three bedroom summer camp serving a family of five for three weeks in summer and 12 weekends during the rest of the year.)

Proposed method of disposal is: \_\_\_\_\_  
(The private wastewater disposal system described on the attached Application.)

I recognize that any approval the Division may give will be limited to the usage described above and may be enforced by requiring a covenant of the Deed.

Space for Notary Seal &  
Signature Below

Owner's Name - Printed \_\_\_\_\_

Address \_\_\_\_\_

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

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