

SANPETE COUNTY CLASS IVb LANDFILL RANDOM LOAD INSPECTION RECORD

INSPECTION INFORMATION	
Inspector's Name	
Date of Inspection	
Time of Inspection	
TRANSPORTER INFORMATION	
Company Name	
Address	
Phone Number	
VEHICLE INFORMATION	
Driver's Name	
Vehicle Type	
Vehicle License Number	
Description of Waste	
OBSERVATIONS AND ACTIONS TAKEN	
Photo Documentation <input type="checkbox"/> Yes <input type="checkbox"/> No	

Driver's Signature* _____ Date _____

Inspector's Signature _____ Date _____

*Driver's signature hereon denotes his presence during the inspection and does not admit, confirm or identify liability

SANPETE SANITARY LANDFILL COOPERATIVE CLASS IVb PLRMIT APPLICATION