**SAN ANDREAS SANITARY DISTRICT**

PERMIT FOR PORTABLE TOILET USE

**Ordinance 8, Section 3.4: Use of Portable Toilets**: Portable Toilets are not to be used as an alternative for the Public Sewer System. Therefore, portable toilets shall not be allowed except under the following limited conditions:

* Property where an active building permit exist,
* Use by public agencies or public utilities
* Upon a permit being issued by the District

**Instructions:** Complete This Application, Sign, and Mail (or Return) application with the appropriate fee to District Office at:

San Andreas Sanitary District

 675 Gold Oak Road

 P.O. Box 1630

 San Andreas, CA 95249

Use of a Portable Toilet, by definition, is temporary and unusual. The terms and conditions for the duration and frequency of use by a residential or commercial customer shall be subject to the approval of District Manager.

Permits allowing portable toilets shall only be for a limited time period and for unique situations where the existing facilities are inadequate. The duration of the permit will be limited to time necessary to allow for delivery, setup, use, and pickup of the portable toilet.

**Date of Planned Use**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Account #:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Install Date**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Pickup Date**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Reason for Planned Use:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Applicant Information**:

Property Owner Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Business Name, If Applicable: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mailing Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Street/PO Box City State Zip

Physical Address, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If Different Number / Street

Phone Number: ( ) \_\_\_\_\_\_\_\_-- \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Property Owner: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Approval by District Manager: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE: \_\_\_\_\_\_\_\_\_\_\_\_