



County of Riverside - Community Health Agency
Department of Environmental Health

Environmental Resources Management Division

4080 Lemon St Mall, 9th floor Riverside, CA

mail to P.O. Box 1280 Riverside Ca, 92502

**Class A Biosolids
Transporter Application**

NAME OF BUSINESS:	
ADDRESS:	
MAILING ADDRESS:	
TYPE OF BUSINESS (Please Check):	
<input type="checkbox"/> Special District <input type="checkbox"/> Partnership <input type="checkbox"/> Agency <input type="checkbox"/> Municipality <input type="checkbox"/> Sole Proprietorship	
<input type="checkbox"/> Joint Venture <input type="checkbox"/> Lease <input type="checkbox"/> Corporation <input type="checkbox"/> Business Trust	
<i>(If Business Trust, attach names and home addresses of all members of the Trust)</i>	
NAME OF APPLICANT:	
RELATIONSHIP TO TRANSPORTER:	
CONTACT PERSON:	TELEPHONE NUMBER: