

Expires yearly March 31st
Fee 1st Pump \$20.00 per year
\$10.00 per each additional pump

For Office Use Only

Customer Number _____
Number of Pumps _____

PRIVATE PUMP LICENSE APPLICATION
Article III Sections. 26-61 – 26-66

CONFIDENTIAL

Business Name: _____

Business Address: _____

Business Phone: _____ Fax Number: _____

Email Address: _____

Number of Pumps: _____

Owner/Manager Name: _____

Home Address/Billing Address: _____

City, State & Zip: _____

Home Phone: _____ Emergency Phone Number: _____

I affirm that the above information is true and complete to the best of my knowledge and belief.

Signature of Applicant

Date

***Please include copy of Drivers License**