

CUSTOMER LOG

Water Depot, Inc.

1301 Avondale Rd
New Windsor, MD, 21776
Phone: (410) 857-9670 Fax: (410) 857-2814
www.oilwaterdisposal.com

Generator Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Contact Name: _____

Contact Primary Phone: _____ Contact Fax: _____

EPA ID#: _____

Nature of water coming into our facility (please check)

Ground Water

Tank Bottoms

Gas Bottoms

Misc.

Other: _____

Please Identify

Approximate gallons per year coming into our facility: _____

Generator's Certification:

I hereby certify that all information submitted in this document is a true and accurate description of this waste. This waste has not been combined or blended in any amount with PCB's, Herbicides, Pesticides, or any other material defined as Hazardous Waste. Generator/Shipper agrees to indemnify and hold Water Depot Inc. harmless for any damages arising from or in any way relating to a breach of this Certification Statement. I will be responsible for any cost associated with the cleanup, decontamination or fines associated with providing Water Depot Inc. with Hazardous or unacceptable material.

If electronically signing, I agree that my electronic signature below, is the legally binding equivalent to my handwritten signature. Whenever I execute an electronic signature, it has the same validity and meaning as my handwritten signature. I will not, at any time in the future, repudiate the meaning of my electronic signature or claim that my electronic signature is not legally binding.

Check this box if signing electronically

To sign electronically, please check the box below, then type your first and last name. To use an ink signature, leave the box unchecked, print this document, and then hand write your signature in ink.

I understand that checking this box constitutes that I am opting to provide my electronic signature. My first and last name, typed below, is the legally binding equivalent to my handwritten signature. Conversely, I understand that to opt out of using my electronic signature, I have left this box unchecked, printed this document, and hand signed below in ink.

Authorized Signature

Printed Name

Date