



**Nevada Division of Environmental Protection  
Bureau of Water Pollution Control**

**TEMPORARY/PORTABLE HOLDING TANK APPLICATION**

**THE FOLLOWING INFORMATION MUST BE INCLUDED WITH THE APPLICATION:**

**SITE PLAN:**

- \_\_\_\_\_ Site plan drawn to scale
- \_\_\_\_\_ Setbacks shown and in accordance with NAC 445A and other local requirements
- \_\_\_\_\_ Public sewer not available and site not suitable for conventional system

**DISCHARGE INFORMATION:**

- \_\_\_\_\_ Domestic sewage only
- \_\_\_\_\_ List all fixtures associated with discharge

**HOLDING TANK INFORMATION:**

- \_\_\_\_\_ Tank is owned by the septic pumper, with name and phone number clearly marked
- \_\_\_\_\_ Minimum tank capacity of 1,000 gallons
- \_\_\_\_\_ Tank must comply with all standards established in NAC 445A.
- \_\_\_\_\_ Tank designed and located for easy pumping
- \_\_\_\_\_ Tank must be watertight.
- \_\_\_\_\_ No means of sewage overflow (vents, discharge piping, etc.)
- \_\_\_\_\_ Tank must not be buried (unless approved by NDEP)

**PUMPING CONTRACTOR:**

- \_\_\_\_\_ Name of Pumping contractor
- \_\_\_\_\_ Contractor Permit Number (Health Division)
- \_\_\_\_\_ Copy of the contract with Septic Pumping Contractor
- \_\_\_\_\_ Disposal site

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**Certification:**

“I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a holding tank designed to assure that it complies with Nevada Division of Environmental Protection regulations. I also confirm that records will be maintained at the project site from the start of activities, and that the site will be compliant. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines for knowing violations.”

Printed Name of Applicant (Owner/Operator): \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**A copy of the permit will be mailed to you along with your discharge authorization.**

**Send completed form to:**

**Nevada Division of Environmental Protection  
Bureau of Water Pollution Control  
901 S. Stewart Street, Suite 4001  
Carson City, Nevada 89701-5249**