



**ILLINOIS DEPARTMENT OF NATURAL RESOURCES
OFFICE OF OIL AND GAS RESOURCE MANAGEMENT**
ONE NATURAL RESOURCES WAY
SPRINGFIELD, ILLINOIS 62702-1271
(217) 782-7756



**OG-16 APPLICATION FOR LIQUID OILFIELD WASTE
TRANSPORTATION SYSTEM**

NAME OF APPLICANT (must be same as on bond) BUSINESS TELEPHONE

STREET, RURAL ROUTE, P.O. BOX EMERGENCY TELEPHONE

CITY STATE ZIP CODE COUNTY

CORPORATION? YES NO
REGISTERED WITH STATE OF ILLINOIS? YES NO REGISTRATION #: _____

BONDING COMPANY (attach original \$10,000 bond) BOND NUMBER

SYSTEM PERMIT FEE IS \$100.00

BRIEFLY DESCRIBE PROPOSED ACTIVITIES OF SYSTEM, COUNTIES OF OPERATION, TYPES OF LIQUID OILFIELD WASTE TO BE TRANSPORTED AND WHETHER VEHICLES (TANKS) ARE OWNED OR LEASED:

I, THE UNDERSIGNED, CERTIFY THAT THE INFORMATION CONTAINED HEREIN IS TRUE AND COMPLETE; AND THAT THE REMOVAL, TRANSPORTATION, DISPOSAL, AND STORAGE OR TREATMENT OF LIQUID OILFIELD WASTE WILL BE IN COMPLIANCE WITH THE 62 ILLINOIS ADMINISTRATIVE CODE SECTION 240.940.

NAME OF APPLICANT (PLEASE PRINT)

SIGNATURE OF APPLICANT TITLE DATE

APPLICANT FEIN # (required if applicable)