Attachment: Additional Drivers for the Recycled Water Truck Program Use Permit

Customer Information

Contact Name: _____

Name of Company: _____

1. (continued) Customer Information

Please list below all drivers/vehicle operators who will access the fill station. All drivers must be trained and added to the permit. By signing, drivers certify that they have received training and agree to abide by the Truck Program Guidelines provided.

			(For EBMUD use)	
Driver Name	**CA Driver License #**	**Driver Signature**	**Trainer initials**	**Date**