



APPLICATION INSTRUCTIONS: EFFLUENT TRUCKFILL CARDS

1. Complete **"Effluent Fill Station Application/Agreement for Use of Treated Wastewater Effluent"** in pages 2-3 of this packet. You need one application per card.
2. A copy of the full text of Sparks Municipal Code 13.85 is available upon request from Community Services. It may also be accessed online at http://www.cityofsparks.us/municode/Title_13/85/index
3. Submit the completed application to Community Services for review and approval. You can email this application to Jon Walker at jwalker@cityofsparks.us. You can also call Jon Walker at 775-353-4069.
4. If approved, take page 4 of this packet to the Customer Service counter at Sparks City Hall for payment.
5. After payment, obtain receipt and present to Community Services for issuance of Truckfill card.



**Effluent Fill Station
Application/Agreement for Use of Treated Wastewater Effluent
For Construction Use**

COMPANY NAME: _____

COMPANY REPRESENTATIVE: _____

EMAIL ADDRESS FOR CONTACT: _____

BILLING STREET ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

BILLING PHONE NUMBER: _____

TRUCK CAPACITY: _____ TRUCK ID: _____ LICENSE PLATE: _____

PIN NUMBER REQUESTED (4 digits): _____

AGREEMENT

1. A separate application/agreement must be obtained from the City of Sparks for each vehicle that transports wastewater effluent. The applicant shall receive one (1) effluent card upon successful completion of this application. Cards shall be non-transferable from one vehicle to another.
2. FEES:
 - a. Application and Card Fee: \$25.00, or the most current rate stated in Sparks Municipal Code 13.85.040(A)
 - b. Replacement Card Fee: \$25.00, or the most current rate stated in Sparks Municipal Code 13.85.040(A)
 - c. Effluent Use Fee: \$1.84 per 1000 gallons delivered, or the most current rate stated in Sparks Municipal Code 13.85.030(B)
3. Truckfill usage will be billed quarterly. If payment is not received by the due date of payment specified on the bill, a twenty five percent (25%) late payment charge shall be assessed against the outstanding balance in accordance with SMC Section 13.27.040 and service may be discontinued. The City may terminate service for nonpayment of a bill if the bill is not paid within thirty (30) days after its due date, provided the City has given the Customer at least five (5) days prior notice of such termination.
4. The City of Sparks treated wastewater effluent Fill Stations are equipped with a magnetic stripe card reader. Each delivery truck will be provided one card. The card can be used at each City of Sparks Fill Station. The Fill Stations are available for use to valid card holders at the posted times.

5. The vehicle will be inspected as necessary by City of Sparks personnel prior to issuance of the permit at the time of application.
6. Vehicles used for hauling and applying treated wastewater effluent shall be equipped with signs and lettering which:
 - a. Are located on both sides and the rear of the vehicle,
 - b. Are marked, prior to the issuance of a permit, with contrasting lettering at least two inches high and readable from at least a one hundred-foot distance; and
 - c. State: "Treated Wastewater Effluent – Avoid Contact".
7. The vehicle transporting treated wastewater effluent shall not spill or leak during transportation.
8. Treated wastewater effluent shall not be discharged except at project sites that meet requirements herein. No ponding or runoff shall occur.
9. Treated wastewater effluent shall not be discharged into the storm drainage system. Treated wastewater effluent shall not be used for street wash-downs.
10. Persons at the project site must be informed, and the project site posted, that treated wastewater effluent is being used and that all persons shall avoid contact with said treated wastewater effluent.
11. No direct connections are allowed between the vehicle and any part of a domestic potable water system.
12. Any spills of treated wastewater effluent require oral notification within twenty-four hours of the spill to the City of Sparks Environmental Control Section, telephone number (775) 861-4152, and a written report, detailing the circumstances and probable cause of the spill, within five days of the spill.
13. I understand that by signing this document on this ____ day of _____ 20__, I agree to terms and conditions set forth in the Sparks Municipal Code Chapter 13.85 as it applies to effluent truckfill service. Further, I agree to indemnify and hold the City of Sparks harmless for any and all liability or loss arising in any way out of my performance of this agreement.

COMPANY REPRESENTATIVE (NAME): _____

SIGNATURE: _____

DATE: _____



PAYMENT OF NEW EFFLUENT TRUCKFILL CARD

**PLEASE PRESENT APPLICATION WITH PAYMENT TO
CITY OF SPARKS CUSTOMER SERVICE LOCATED AT SPARKS CITY HALL.**

COMPANY NAME: _____

COMPANY REPRESENTATIVE: _____

DATE OF PAYMENT: _____

TOTAL AMOUNT PAID: _____

For City of Sparks Customer Service Use Only

Please receive payment using the following:

aKey: **098006**

Description: **EFFLUENT TRUCKFILL CARD APPLICATION FEE**

For City of Sparks Community Services Use Only

Card #: _____

City of Sparks Representative: _____

