

Brighteyes Enterprise, Inc.

395 County Road 608
Dayton, TX 77535



Invoice

DATE	INVOICE NO.
7/18/2023	27443

PAID
07/18/2023

BILL TO	INSTALLATION LOCATION
Eddie Martin 316 CR 6512 Dayton, TX 77535	Eddie Martin 316 CR 6512 Dayton, TX 77535

TERMS	REP
<i>Due on receipt</i>	TL

ITEM	DESCRIPTION	COST	TOTAL
Vacuum 500	Vacuum out 500 gals. of septic fluid and transport to a State approved disposal site. Control Ticket # 292354	350.00	350.00

<i>Thank you for your business!</i>	Total	\$350.00
	Payments/Credits	<i>-\$350.00</i>
	Balance Due	\$0.00

Phone #
936-258-3080

E-mail	Web Site
office@brighteyestexas.com	www.brighteyestexas.com

NONHAZARDOUS WASTE CONTROL TICKET
TRANSPORTER INFORMATION

292354CC
INV: 27443

Name of Transporter: _____ TCEQ Registration # _____
Address: _____ Phone No. _____
License Plate #: Q116-1507 Truck No. 13 Truck Capacity: 2000

GENERATOR INFORMATION
(One Ticket for Each Generator)

Date of Pick-up: 7/18/73 Name: Eddie Martin
Address: 316 W. 1st St. D. 76101 Phone No. (817) 729-5564
Capacity of Tank/Trap: 2000 Quantity of Waste Removed (Gallons): 500
Waste Removed From: Grease Trap _____ Septic Tank X Other: _____
Chemical Toilet: _____ Grit Trap: _____ Specify: _____
Municipal Wastewater Treatment Plant Sludge: _____
Municipal Water Treatment Plant Sludge: _____
Domestic Holding Tank: _____

I hereby certify that the waste is as described.

Generator's Signature: Eddie Martin

TRANSPORTER CERTIFICATION

I certify to the best of my knowledge that this load contains no chemical or hazardous waste material. I am aware that falsification of this ticket may result in forfeiture of my transporter's registration and/or the privilege of utilizing state permitted disposal facilities. I also understand that falsification of these type records is a felony offense in the State of Texas and may result in the revocation of my waste transportation permit, criminal prosecution and/or civil penalties of up to \$25,000 per violation.

Truck Driver's Signature: [Signature]

STATEMENT OF DISPOSAL SITE OPERATOR

Disposal Site Name: _____ Permit No. _____

I certify that I have been authorized by the State of Texas to accept the above type wastes and that I have disposed of the above indicated wastes in accordance with the requirements outlined in that authorization.

Site Operator's Name: _____
Print

(Signature) (Date)

Original to Generator at time of pick-up * White Copy to Disposal Site * Yellow Copy for Transporter's Records * Blue Copy
Mail to Generator after completion by Disposal Site Operator * Green Copy Mail to Local Authority