

COMMERCIAL REFUSE CONTAINER PERMITS

Requesting a Refuse Container Permit through the Internet – Logging on and Permit Entry Procedures



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OVERVIEW:

The Chicago City Council passed ordinance 4-260-150 on November 19, 2008 and amended on May 13, 2009 giving the Chicago Department of Transportation (CDOT) the authority for permitting commercial refuse containers (CRC) on both private and public property. This ordinance was amended and renamed 7-28-215 on May 9, 2012.

This ordinance was developed to address a number of issues:

- Desire to have increased oversight over this important public way and public-health issue
- Help recoup Streets and Sanitation costs for CRC inspection and rodent control
- Address CRCs taking up excessive space in alleys
- When unlabeled, no ability to contact owner to address issue
- Will encourage recycling efforts by CRC providers and customers

Under this ordinance the company that provides refuse collection services for a refuse container is responsible for obtaining the CRC permit.

This document is not intended to be a full documentation package for all features of the system, but provides sufficient information for a new or occasional user of the system to gain access and perform required transactions.

COMPANY REQUIREMENTS FOR OBTAINING A CRC PERMIT:

In order to obtain a CRC permit you will need to hold a valid regulated business license for private scavenger activities as defined in the City of Chicago Municipal Code 4-6-130.

To apply for the private scavenger license as well as address any licensing questions, please contact a Department of Business Affairs & Consumer Protection (DBA&CP) Call Center Representative at **312-744-5357** (**74 GOBIZ**). The DBA&CP is located at City Hall, **121** North La Salle Street – Room #800.

Once the provider receives their regulated business license for private scavenger activities, CDOT will provide all of the necessary information in order for the provider to access the City of Chicago Refuse Container Permit web site. From this web site, the provider will be able to generate an invoice for payment.



PERMIT SCHEDULE:

The schedule for the submittal of the locations and payments are as follows:

Period	April to July	August to November	December to March	
Locations due from	Once every	Once every month	Once every month	
providers	month within	within the permit	within the permit	
	the permit	cycle (need to enter	cycle (need to enter	
	cycle (need to	between the 1 st and	between the 1 st and	
	enter between	10 th)*	10 th)*	
	the 1 st and			
	10 th)*			
Payment due	July 15 th **	November 15 th **	March 15 th **	

- * You are required to inform CDOT of any locations changes or container additions before deploying in order to avoid receiving a citation for a non permitted container. Please submit your correction by email to <u>dumpster@cityofchicago.org</u>
- ** The invoice will only be available to print after final container numbers are entered for the last month of the permit cycle (July, November and March)

LOGGING INTO THE APPLICATION:

The CDOT Internet Truck Permit system is designed to be used with **Microsoft Internet Explorer version 8**.

To start the process you will need to go to the City of Chicago's Department of Transportation web site and follow the instructions located under the section labeled "Permits/Applications/Information" or you can access the application directly by going to <u>https://webapps.cityofchicago.org/crcps/</u>. Each company may elect to save the link as a **Favorite** or desktop shortcut for quick access. The following screen will appear

CHICAGO DEPARTMENT OF TRANSPORTATION	ommercial Refuse Container Permitting System		There help fe to gui the	are a number of atures available de you through login process
Login		Help		
Please login to access the application.		Forgot Accoun	i <u>t or Password?</u> n Account?	
Account				
Password				
Login				



Prior to logging in you will have received an account number for your company and a password for logging into the web site.



Once the correct account number and password has been entered press the **Login** button and the following data entry screen will come up and you will be able to enter your permit request.



CDEST CHICAGO DEPARTMENT OF TRANSPORTATION	Commercial Refe	use Containe	r Permitting S	ystem		
						Log Out
fministration FAQ						
nter Permit Details						
ompany Name:						
ermit: 12/01/2010 - 03/31/2011						
ddress on Record						
L	ine 1 8475 W	53RD				
	City MCCOO	ĸ				
5	State ∥∟					
	ZIP 60525					
Altornata Addross						
Michael Address	Specify alternate addre	255				
. —						
Line 1 * 17W	/697 BUTTERFIELD R	D				
Line z						
State *						
ZIP * 601	81 -					
Contact Information						
First Name * JO	HN 1					
Last Name * DO)E					
Phone * 00	0-000-0000					
_{Email} • em	ail@provider.co	m				
Upload Container Location Det	tails					Help
For	mat details					File upload help
Location Details *		Browse				
Specify Container Quantities						
Category	Triannual Fee	December	January	February	March	Accumulated Total
Under one cubic yard *	\$17	0				\$0.00
One to two cubic yards *	\$32	0				\$0.00
Over two to ten cubic yards *	\$63					\$0.00
Begydable *	\$104					\$0.00
Total	No charge	U.		I	1	\$0.00
Terms and Ora ditions						
	By checking this boy I	arree to the fel	owing terms and	conditions		
•	I confirm that the ad	dress, contact ar	d container inform	nation provided a	bove are a	ccurate.
Save						



This entry screen is divided into several sections.

The first section gives the name of the applicant that has just logged in and the current Triannual permit period:

CHICAGO DEPARTMENT Commercial Ref OF TRANSPORTATION CANADA STANDARD OF TRANSPORTATION Application FAG	use Container Permitting Syster	n Los Out
Enter Permit Details Company Name: Refuse R Us Permit: 04.01/2009 - 07/31/2009	Company Name Current Permit Period	

The next section gives the mailing address of the headquarters of the company as setup in the city's licensing system. This is the address that is tied to your scavenger license.

Address on Record		
Lir	ne 1	8475 W. 53RD
	City	мссоок
St	tate	IL
	ZIP	60525

To correct this information you will need to contact DBA&CP

The third section will allow you to enter an address tied solely to the CRC permit. For example the address on the scavenger license might be a corporate headquarter but you want to indicate that the CRC permits are being taken out at another location



Fill in the blank fields on the expanded form to add an alternate address





The next section shows contact information and is required to be filled out. The first time you log into the system this section will be blank but after the information is entered and saved it will appear when ever you log on. This information can be revised by you when ever the information changes.

Note: all fields are mandatory – the system will not let you submit your container quantities or locations if any of these fields are left blank.

The format for the phone number is NNN-NNN-NNNN



Contact Information First Name * JOHN] Last Name * DOE Phone * 000-000-0000 Email * email@provider com

Please note if the contact information is missing or in an incorrect format an error message will display when you click on the save button. Any loaded spreadsheet will have to be reloaded after you make your corrections.

Each month you will be required to load a spreadsheet saved in either a Microsoft Excel or CSV format. This spreadsheet should use the following naming convention <company account no>_<Month and year> so if your company account number is 0000 and this submittal is for June 2009 the spreadsheet should be named 0000_JUN2009

The upload container section works just like Windows Explorer. More information about the spreadsheet format can be found later in this document.





Choose file			? ×
Look in:	My Documents	- 🖬 🍅 🖬	
History Desktop My Documents	Corel User Files Deploy32 Fax Messenger 4.0 Jai KUNA My Business Objects Documents My Data Sources My Digital Editions My eBooks My Music My Pictures	orawin21 Updated SunTRACK Files WebEx 00000_JUNE2009 J11 Complete old files and folders Citation Report JAI_TIME Lion Lisa Lisa Lisa	∐LP Memori i plot
My Computer	•		►
	File name: 00000_JUNE200	9 🗸	Open
My Network P	Files of type: All Files (*.*)	•	Cancel

Upload Container Location	Details	
	Format details	
Location Details *	C:\Documents and Settings\pw0	Browse

Use the next section to enter the number of containers for each category for the current month. Note: <u>do not</u> include any Exempt containers (i.e., containers being used by the Public Schools, City Colleges of Chicago or the Park District) in your quantities.

Specify Container Quantitie	S					
Сатедогу	Triannual Fee	April	May	June	July	Accumulated Total
Under one cubic yard *	\$17	0	0	0		\$0.00
One to two cubic yards *	\$32	0	0	0		\$0.00
Over two to ten cubic yards *	\$63	0	0	0		\$0.00
Over ten cubic yards *	\$164	0	0	0		\$0.00
Recyclable *	No Charge	0	0	0		\$0.00
Total						\$0.00

If this is the first time you are using you will need to enter the appropriate numbers for the previous months in the current period.

Specify Container Quantities						
Category	Triannual Fee	April	May	June	July	Accumulated Total
Under one cubic yard *	\$17	2	2	2		\$25.50
One to two cubic yards *	\$32	103	103	100		\$2448.00
Over two to ten cubic yards *	\$63	7	9	5		\$330.75
Over ten cubic yards *	\$164	1	1	2		\$164.00
Recyclable *	No Charge	1	12	3		\$0.00
Total						\$2968.25



Note: once you save the information you will need to contact CDOT to make any revisions.

The Terms and Conditions requires' you to indicate that the information being submitted is accurate. Once you click the check box you can save (and submit) the information that has been entered.

Terms and Conditions	 By checking this box I agree to the following terms and conditions. I confirm that the address, contact and container information provided above are accurate.
Save	

If the request is accepted by the system the following message will appear on the top of the screen

Information was successfully saved.

Any corrections required need to be communicated to CDOT within 5 business days by sending an email to dumpster.dumpster@cityofchicago.org showing the correction details in addition to the account, month of correction, permit period and charge id if available.

This message also advises you that **if you notice an error in your submittal you have 5 business days to inform CDOT of the correction**. Please submit your correction by email to <u>dumpster@cityofchicago.org</u>

On the final month of a permit period the language under the Terms and Conditions section changes slightly to indicate that you will pay the amount due.

Terms and Condition	15		
	☑ By checking this box I agree to the following terms and conditions.		
	 I confirm that the address, contact and container information provided above are accurate. I agree to pay the amount due specified. 		
Save Print Invoice	Make Payment		



In addition to the Save button there is now a **<Print Invoice>** and a **<Make Payment>** button. The **<Print Invoice>** button allows you to print the invoice for the permit period and provide to your accounting unit to process payment. An example of an invoice is shown below:



INVOICE - PLEASE PAY ONLINE

Date: 03/08/2013

Hauler Name

PO Box 627

Blue Island, IL 60406

Account #: 60563 Due Date: 03/15/2013 Amount Due: \$611,803.00

Account Number	Business Name	Charge ID	Description	Period	Due Date	Amount Due
60563	Hauler Name	3600	Commercial Refuse Container Permit Fee	12/01/2012 - 03/31/2013	03/15/2013	\$611,803.00

Container Details

Container Category	Size	Average Number of Containers	Triannual Rate	Amount Due
Under one cubic yard	Α	1835.25	\$17	\$31199.25
One to two cubic yards	В	15048.50	\$32	\$481552.00
Over two to ten cubic yards	С	957.25	\$63	\$60306.75
Over ten cubic yards	D	236.25	\$164	\$38745.00
Recyclable	R	4139.75	No Charge	No Charge

Payment will need to be made online for the full amount by the due date indicated above.

Please click on the 'Make Payment' button/ link provided for the above charge within the Commercial Refuse Container Permitting System to make the Payment.

City of Chicago, Department of Transportation

Payment for the Invoice is now done on line.

Payments are not accepted by the Department of Transportation Public Way Permitting Office and must be made either on-line or at a Department of Finance cashiering center.



Click on the <**Make Payment**> button to proceed.

eChec	ckout
	Payment Method
	Please select the Payment Method below. Your information is secure and is not kept by the City after payment has been authorized. For additional details on security, see the City's Privacy Policy.
	PLEASE READ CAREFULLY
	I hereby authorize the City of Chicago to charge the amount specified to the designated credit card or account. I understand and agree to pay the card issuer/issuing institution per the terms and conditions established for the card or account specified by the issuing institution. I understand and agree that if an amount is uncollectible as a result of the indicated account being closed or cancelled, the charge will be placed in dispute, or otherwise, then any payments applied by the City of Chicago will be reversed and the debt will remain outstanding, and I will pay the City of Chicago a nonpayment fee of \$34. By clicking " Next " I am acknowledging that I have read and understand the terms and conditions of payment.
	> Payment Method
	Credit Card
	C Check
	Cancel Next

You have a choice of paying either with a credit card or by check. To choose your payment option click on the radio button to the right of method you wish to pay.



If you click on the payment by credit card option the following screen will appear:

Credit Card Information

Please enter your credit card information below. Your payment information is secure and is not saved or stored after the payment amount has been authorized.

Required fields are indicated by *

_				
>	Pay by Credit Caro	d		
	Credit Card Type *	Visa	Select the type of credit card	
	Credit Card Number *	Ex. 1111222233334444	Please enter the credit card number, without any spaces or hyphens between the numbers	
	Expiration Date *		Enter the credit card expiration date	
	CVV/Verification # *		Visa, Mastercard and Discover: Turn the card over. Enter the last three digits printed at the far right side of the signature box American Express: Look for the 4-digit code printed on the front of your card, just above and to the right of the card number	
	Name *		Please enter the cardholder name as it appears on the credit card	
	Street Address *			
	City *		Discuss and the send billing address	
	State *	Illinois 💌	Please enter the clean tara billing address	
	Zip/Postal Code *			
	Back Reset Next			

Fill in all the information requested.

Use the drop downs to select credit card type:





and to select the month and date the credit card expires

Expiration Date *	MM	/ YYYY -
CVV/Verification # *	MM 01 02 03	
Name *	04 05	
Street Address *	06 07 08	
City *	09 10	
State *	11 12	•

Expiration Date *	02 🗸 / YYYY 🗸
CVV/Verification # *	2011 2012 2013
Name *	2014 2015
Street Address *	2016
City *	2018

>	> Pay by Credit Card				
	Credit Card Type *	Visa 💌	Select the type of credit card		
	Credit Card Number *	Ex. 1111222233334444	Please enter the credit card number, without any spaces or hyphens between the numbers		
	Expiration Date *	02 🔹 / 2012 💌	Enter the credit card expiration date		
	CVV/Verification # *	999	Visa, Mastercard and Discover: Turn the card over. Enter the last three digits printed at the far right side of the signature box American Express: Look for the 4-digit code printed on the front of your card, just above and to the right of the card number		
	Name *	HAULER	Please enter the cardholder name as it appears on the credit card		
	Street Address *	123 ANY STREET			
	City *	ANY TOWN			
	State *	Illinois 💌	Please enter the credit card billing address		
	Zip/Postal Code *	00000			
	Back Reset Next				

Click on the **<Reset>** button to clear your entry or the **<Next>** button to proceed. If the **<Next>** button is pressed a confirmation screen will come up:



Order Verificatio	n		
Your order is now ready for processing; please review it carefully. If you would like to change the payment information, click the 'Edit Payment Information' button. Please do not use the back button of your browser since data on the previous page has expired.			
To submit this order, p	lease click the "Submit Payment" button only once.		
Item	Description	Quantity	Amount
CRC Permit Fee	Period 12/01/2011 - 03/31/2012 1 \$7,3		\$7,384.25
Payment Information	HAULER Address: 123 ANY STREET, ANY TOWN, IL 00000 Card #: xxxxxxxxx1111 Exp Date: 02/12		
Total Payment Amount			\$7,384.25
	Edit Payment Information Submit Paym	ent	

To make a change click on the **<Edit Payment Information>** button to submit the payment choose the **<Submit Payment>** option.

If you click on the payment by **check option**

>	Payment Method
0	Credit Card
۲	Check
	Cancel Next

the following screen sill appear:

Ch	Check Information				
Ple	ase enter your account in	formation below. Your payment	information is secure and is not saved or stored after the		
pai	menc amounc has been a	utionzeu.	Required fields are indicated by *		
>	Pay by Check				
	ABA/Routing Number *		Please enter the routing number, without any spaces or hyphens between the numbers		
	Bank Account Number *		Please enter the account number, without any spaces or hyphens between the numbers		
	Name on Account *		Please enter the account holder name		
	Bank Account Type *	• Personal • O Business	Please enter the account type		
¥	If your bank account has fraud protection please call Customer Services at 312-747-4747 to get the City's identification number. This will need to be provided to your bank before making the payment.				
	L:123456789: 12345#67890#90675				
	ABA Number Account Number				
	Back Reset Next				



Fill in all the information requested.

Che	Check Information			
Pleas	Please enter your account information below. Your payment information is secure and is not saved or stored after the			
payn		luchonzed.	Required fields are indicated by *	
>	Pay by Check			
	ABA/Routing Number *	123456789	Please enter the routing number, without any spaces or hyphens between the numbers	
	Bank Account Number *	123456789	Please enter the account number, without any spaces or hyphens between the numbers	
	Name on Account *	Hauler	Please enter the account holder name	
	Bank Account Type *	O Personal 💿 Business	Please enter the account type	
*	If your bank account has fraud protection please call Customer Services at 312-747-4747 to get the City's identification number. This will need to be provided to your bank before making the payment.			
	+ 1234557891: 12345=67890=90675			
	ABA Number Account Number			
	Back Reset Next			

Note: you will need to indicate if you are using a business or personal checking account.

Click on the <**Reset**> button to clear your entry or the <**Next**> button to proceed. If the <**Next**> button is pressed a confirmation screen will come up:

Order Verification	ı		
Your order is now ready information, click the 'Ed data on the previous pa	for processing; please review it carefully. I it Payment Information' button. Please do ge has expired.	f you would like to change the pay o not use the back button of your l	ment browser since
To submit this order, pl	ease click the "Submit Payment" button	only once.	
Item	Description	Quantit	y Amount
CRC Permit Fee	Period 12/01/2011 - 03/31/2012	:	\$6,562.75
Payment Information	Hauler Account #: 123456789 Bouting #: 123456789		
Total Payment Amount:	Routing #. 123450789		\$6,562.75
	Edit Payment Information	Submit Payment	

To make a change click on the **<Edit Payment Information>** button to submit the payment choose the **<Submit Payment>** option.



If there was an issue with the submittal the following message will appear:

Application FAQ					
The Payment Transa	The Payment Transaction cannot be completed at this time. Please try again later				
Go To Permit Details					

If the system did not receive confirmation from the cashiering system that a payment was made the following message will appear the next time you login



Click on the *Proceed*> button and follow any steps the system may indicate is needed.

When a payment is submitted the following screen will appear if the payment was processed:





At this point you can print a receipt by clicking on the **<Permit Receipt>** button





Date: 03/08/2013

RECEIPT

Hauler Name

1501 W. 175TH ST. HOMEWOOD, IL 60430

Account Number	Business Name	Charge ID	Description	Period	Due Date	Amount Due
67440	Hauler Name	3602	Commercial Refuse Container Permit Fee	12/01/2012 - 03/31/2013	03/15/2013	\$20.75

CAPS CODE : BH30-100-84-2135-3475-REFUSE CONTAINER FEE

Container Details

Container Category	Size	Average Number of Containers	Triannual Rate	Amount Due
Under one cubic yard	A	0.75	\$17	\$12.75
One to two cubic yards	В	0.25	\$32	\$8.00
Over two to ten cubic yards	С	0.00	\$63	\$0.00
Over ten cubic yards	D	0.00	\$164	\$0.00
Recyclable	R	996.00	No Charge	No Charge

Payment in the amount of \$20.75 has been received on 12/17/2012 towards Commercial Refuse Container Permit fees as detailed above.

City of Chicago , Department of Transportation



You will also receive a confirmation sent to the email address provided in the Contact Information section of the internet entry form.

City Of Chicago Payment Confirmation Receipt

```
info@cityofchicago.org [info@cityofchicago.org]
Sent: Mondey, Januery 10, 2011 12:05 PM
To: TruckTravel
```

Dear MAULER. Thank you for using the Online Payment Center.

This message serves as a confirmation receipt for a payment made through the City of Chicago Online Payment Center for the following transaction:

Transaction Code: 1250 408025 Date: Jan 10, 2011

Details:

1850 - CRC Permit Fee - Period 12/01/2011 - 03/31/2012, Amount : \$7,384.25

Subtotal: \$7,384.25

Total: \$7,384.25

Paid by: Online Check Bank Number: Account Holder: HAULE Account Number: *****6789 Account Type: Checking - Business Thank you for using the Online Payment Center. Sincerely,

City of Chicago Online Payment Center

If the payment is rejected (e.g., for insufficient funds) you will be notified by the City's Department of Revenue to arrange another method of payment. Additionally, until payment is made the internet form will show the delinquent payment.

Charge_ID	Period Begin	Period End	Amount Due	Due Date	
302	04/01/2010	07/31/2010	\$36489.50	07/15/2010	Make Payment
e that failure to	pay outstanding dues	promptly will result in	the referral of your acc	ount to collections. Fin	es may also be levied

Payment <u>must</u> be received on or prior to the due date.



City of Chicago Department of Transportation Division of Infrastructure Management INSTRUCTIONS FOR FILLING OUT THE CONTAINER LOCATION SPREADSHEET:

Locations should be supplied in a Microsoft Excel spreadsheet saved with a file extension – "csv", "xls" or "xlsx".

COLUMN	DATA TO BE FILLED IN
HEADING	
Provider Name	The name of your company
Account	The account number assigned to your business by CDOT (this is a unique
Number	number assigned to your company)
Name on	Enter the company name listed on the container if different from your
container	company.
Prop Addr	The address of the property the containers are located at
Dir	The street direction (i.e., $N = North$, $S = South$, $E = East$, $W = West$)
Street Name	The street name
Suf	The street suffix (e.g., AV = Avenue, BV = Boulevard, PL = Place, ST =
	Street)
Size Of	The size of the container that is located at the site ($\mathbf{A} = $ Under 1 Cubic Yd; \mathbf{B}
Container	= 1-2 Cubic Yds; \mathbf{C} = over 2-10 Cubic Yds; \mathbf{D} = over 10 Cubic Yds; \mathbf{E} =
	Exempt*, R = Recyclable). If multiple sizes are being used please use a
	separate line for each size.
Number of	The number of the containers at this location of the specified size
Containers	
Start Date	The date your contract began at this site (MM/DD/YY)
End Date	The date your contract is scheduled to end at this site (MM/DD/YY)
New entry from	If there are new container(s) at an address since the last submittal list the
Last Submittal	container(s) under a separate line and enter Yes in this column

* Use the Exempt container size designation if the container is being used by a unit of local government or school district that levies a property tax exclusively within the City of Chicago. There will be no charge for these containers.

If needed, a template of the spreadsheet can be downloaded from the application.



ERROR MESSAGE	CAUSE
Please enter an account.	Account has not been entered.
Please enter a password.	Password has not been entered.
Incorrect account or password.	Account or Password is Incorrect.
A valid scavenger license could be not found	The Account value entered does not have a valid
for the account that was entered.	Scavenger License nor has submitted an application
To apply for the private scavenger license as	for the same recently.
well as address any licensing questions, please	
contact Betsy Gonzalez of the Department of	
Business Affairs & Consumer Protection	
(DBA&CP), Business Assistance Center directly	
at #312-744-5357. The DBA&CP is located at	
City Hall, 121 N. La Salle Street - room #800.	
Please enter a first name.	No first name has been entered.
Please enter a last name.	No last name has been entered.
Please enter a valid email address.	Email address has been entered in incorrect format.
<entered text=""> is longer than the maximum of</entered>	Indicated text exceeds the allowed length of 50
50 characters.	characters
Please enter a phone number.	No phone number has been entered.
Please enter a phone number in the format	The phone number value entered is in an incorrect
XXX-XXX-XXXX.	format.
Please enter line 1 of the address.	No line 1 of the address has been entered.
<entered text=""> is longer than the maximum of</entered>	Indicated text exceeds the allowed length of 90
90 characters.	characters
<entered text=""> is longer than the maximum of</entered>	Indicated text exceeds the allowed length of 35
35 characters.	characters
Please enter a city.	No city has been entered.
<entered text=""> is longer than the maximum of</entered>	Indicated text exceeds the allowed length of 30
30 characters.	characters
Please select a state.	No state has been selected.
Please enter a zip code.	No zip code has been entered.
Please enter a zip code in the format xxxxx.	The zip code value entered is in an incorrect format.
Please enter a zip code extension in the format	The zip code extension value entered is in an
XXXX.	incorrect format.
Please enter a quantity for each container	Issue with container number entered. (Input is a
category. Please enter 0 if there is no quantity	character or decimal number)
to submit.	
Please enter a quantity for each container type.	Issue with container number entered. (Number
The quantity must be between 0 and 1000000.	input is less than 0 greater than 1000000)
Please agree to the terms and conditions.	The Terms and Conditions Checkbox is not
	checked.
Please select a file of size less than 10MB.	File selected is greater than 10MB in size.
The location details file must be an excel	File selected is of a different extension.
spreadsheet (.xls or .xlsx) or comma separated	
values (.csv).	
Please limit your comments to 255 characters	Comments entered are greater than 255 characters
Of less.	in length
The Payment Transaction cannot be completed	The system is unable to accept the payment at the
at this time. Please try again later.	time of the payment attempt. Payment will need to
	de tried later.



ERROR MESSAGE	CAUSE
Before you may proceed, the system needs to	The CRC system did not obtain eCheckout
check the status of your last payment attempt.	confirmation on the outcome of a payment
Please click on the button below to proceed to	transaction initiated by the user in a prior session.
the Enter Permit details page or to view details	
regarding any payment confirmation that is	
obtained. Note that sometimes, it may take a	
few minutes before the next page is displayed.	