

APPLICATION FOR PERMIT TO ENGAGE IN THE BUSINESS OF SOLID WASTE COLLECTION AND HAULING IN TRIMBLE COUNTY.

PERMIT: RESIDENTIAL _____ COMMERCIAL _____
 INDUSTRIAL _____ GENERAL _____

BUSINESS NAME: _____

ADDRESS: _____

TELEPHONE: _____

OWNER/PRESIDENT: _____

HOME ADDRESS: _____

HOME TELEPHONE: _____

DESCRIBE PREVIOUS WASTE HAULING EXPERIENCE, INCLUDING LOCATION AND DURATION OF COLLECTION SERVICES.

DRIVERS OTHER THAN OWNER:

Name: _____ KY Drivers License # _____
Name: _____ KY Drivers License # _____
Name: _____ KY Drivers License # _____
Name: _____ KY Drivers License # _____
Name: _____ KY Drivers License # _____

(IF MORE SPACE IS NEEDED, SEE ATTACHED PAGE.)

DO YOU HAVE AT LEAST \$300,000.00 PER OCCURRENCE LIABILITY INSURANCE COVERAGE?

_____ YES _____ NO

DOES YOUR LIABILITY COVERAGE INCLUDE AT LEAST \$100,000.00 FOR ANY SPILL CLEANUP?

_____ YES _____ NO

A COPY OF YOUR INSURANCE POLICY MUST ACCOMPANY THIS APPLICATION

TYPE OF VEHICLES PROPOSED FOR USE IN HAULING:

Truck Number	VIN NUMBER	Year	Make	Capacity

(If More Space is needed, see attached page.)

HOW WILL WASTE BE COVERED AND CONTAINED?

PROPOSED ROUTES: PLEASE ATTACH A ROUTE SCHEDULE, INCLUDING PICKUP TIMES, DAYS OF THE WEEK, AND ROUTE NAMES.

- A FEE OF \$100.00 FOR EACH VEHICLE WITH UP TO (2) TONS CAPACITY AND \$250.00 FOR EACH VEHICLE WITH CAPACITY OVER TWO (2) TONS, MUST ACCOMPANY THIS APPLICATION. IN THE EVENT THAT A PERMIT IS DENIED, THE FEE WILL BE REFUNDED. PLEASE MAKE CHECK PAYABLE TO *TRIMBLE COUNTY FISCAL COURT*.

NUMBER OF PERMITS REQUESTING: _____ AMOUNT ENCLOSED: _____

FREQUENCY OF PICKUP:

WEEKLY___ TWICE WEEKLY__ OTHER (DESCRIBE)_____

PROPOSED RATES: (A FEE SCHEDULE MAY BE ATTACHED)

PLACE OF DISPOSAL: _____

REFERENCES: _____

Affidavit: By my signature below, I acknowledge that I have read the regulations regarding the collection and transport of solid waste in Trimble County; I further acknowledge that I am aware of the fact that to dispose of solid waste in any place other than a permitted site is a violation of state and local law. I agree to abide by the regulations of the Trimble County Fiscal Court, and the Commonwealth of Kentucky with regard to environmentally sound handling and disposal of solid waste. I understand that failure to observe such laws and regulations could result in the loss of my permit to operate in Trimble County.

Signature

Date

Please contact Matt Gossom, Trimble County Solid Waste Coordinator with any questions or comments about this application. For an electronic version MGossom@bwcsllc.com.