

Dumpster Request Form

Date: _____

Name: _____

Address: _____

Phone #: _____

Cell #: _____

Location where dumpster is to be dropped. (Specific Directions)

**Mail Back to Trimble County Solid Waste Coordinator, PO Box 251
Bedford, KY 40006 Attn: Matt Gossom**

Official Use Only

Form Received: _____

Scheduled Delivery on: _____

Delivered Date: _____

Pickup Date: _____

Once Dumpster is Delivered it will remain onsite for two weeks.
It will be picked up after the second week. If you still need it please fill out another dumpster request form.