

WEST PENNSBORO TOWNSHIP

2150 Newville Road, Carlisle, PA 17015 • Phone: (717) 243-8220 • Fax: (717) 243-1592

TRASH COLLECTION & RECYCLING REGISTRATION FORM

Description	Name:			
am currently a customer of Apple Valley Waste Services				
am currently a customer of Apple Valley Waste Services	Owner's Address:			
already have the following at the premises:	Contact Number:	Email Address:		
Reason for Exemption: Property Owner #1 () Exempt () Billed Name Address Home Phone Cell Phone Email Property Owner #2 () Exempt () Billed Name Address Home Phone Cell Phone Email Exemption steroid for Exemption shall be responsible for paying any and all fees associated with the Trash Toter and Recycling Toter) \$55.75/quarter \$49.75/quarter \$49.75/quarter \$49.75/quarter \$43.50/quarter \$43.50/quarter \$5.00 per bag \$5.00 per bag \$6.00 per bag \$6.00 per bag \$6.00 per bag \$7.00 per	I am currently a customer of Apple Valley Waste Services	s 🗆 YES 🗀 N	NO	
Please place an X on the appropriate line to indicate the level of service requested & include date of birth for Sr. Rate FULL SERVICE (Trash Toter and Recycling Toter) \$55.75/quarter SENIOR CITIZEN SERVICE (Trash Toter and Recycling Toter) \$49.75/quarter SENIOR CITIZEN SERVICES (Recycling Toter) \$43.50/quarter RECYCLING ONLY SERVICES (Recycling Toter) \$43.50/quarter BAG SERVICE (Bags purchased from Township Office) \$5.00 per bag (Minimum 12 bags per year) EXEMPT(Individuals/Businesses who claim exempt status must complete the exemption form) EXEMPTION FORM Reason for Exemption: Property Owner #1 () Exempt () Billed Name	I already <u>have</u> the following at the premises: Trash T	Γoter	oter	
FULL SERVICE (Trash Toter and Recycling Toter) \$55.75/quarter SENIOR CITIZEN SERVICE (Trash Toter and Recycling Toter) (65 years or older) DOB: Verified by: RECYCLING ONLY SERVICES (Recycling Toter) \$43.50/quarter BAG SERVICE (Bags purchased from Township Office) (Minimum 12 bags per year) EXEMPT(Individuals/Businesses who claim exempt status must complete the exemption form) EXEMPTION FORM Reason for Exemption: Property Owner #1 () Exempt () Billed Name Address Home Phone Cell Phone Cell Phone Cell Phone Email Cell Phone Cell Phone Email Cell Phone Cell Phone Email Cell Phone Cell Phone Email Cell Phone Cell Phone	Is this property a rental? YES NO	•		
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Property Owner #2 () Exempt () Billed Name Address Home Phone Cell Phone Email Email Property Owner #2 () Exempt () Billed Name Address Home Phone Cell Phone Email Email Property Owner #2 () Exempt () Billed Name Address Home Phone Cell Phone Email Email Property Owner #2 () Exempt () Billed Name Address Home Phone Cell Phone Email Email	EXEMI	PTION FORM		
Name	Reason for Exemption:			
Address Home Phone Home Phone Cell Phone Email Email Email Home Phone Email	Property Owner #1 () Exempt () Billed	Property Owner	Property Owner #2 () Exempt () Billed	
Home Phone	Name	Name	Name	
Cell Phone	Address	_ Address		
Email Email	Home Phone	Home Phone		
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	Collection and Recycling Program.	copolisione for paying all	j and an rees associated with the Trash	
Signature: Date:	Signature:	Date:		