

**APPLICATION FOR LICENSE TO OPERATE AS A COLLECTOR
OF RESIDENTIAL SOLID WASTE IN GUILFORD COUNTY**

The undersigned hereby applies for a ~~five-year~~ **three-year** license, for the period ~~January 1, 2018~~ **June 1, 2019** through ~~December 31,~~ **June 30,** 2022, or the balance thereof, to operate as a collector of solid waste in Guilford County, and agrees to abide by all rules and regulations of the State of North Carolina, the Board of Commissioners of Guilford County, and the Guilford County Board of Health pertaining to solid waste collection and disposal. Further, the undersigned also agrees to an annual facility and collection equipment inspection by Guilford County, to provide an annual solid waste/recycling report as required by the County, ~~and~~ to provide a minimum of twice per month curbside recycling service to residential subscribers, ~~and~~ **adhere to the additional terms of service attached hereto.** The terms of this license are subject to applicable law. If additional space is required to provide complete information, please attach additional sheets as necessary.

COMPANY NAME: REPUBLIC SERVICES PHONE.: _____

CONTACT PERSON: _____ E-MAIL: _____

FACILITY ADDRESS: _____ FAX: _____

MAILING ADDRESS: _____

EQUIPMENT (Describe all collection vehicles, including make, model, and vehicle identification number):

NUMBER OF EMPLOYEES: _____ NUMBER OF CUSTOMERS: _____

TOWNS/ROUTES COVERED: _____

COLLECTION SCHEDULE: _____

METHOD & PLACE OF DISPOSAL FOR SOLID WASTE: _____

METHOD & PLACE OF DISPOSAL FOR RECYCLABLE MATERIALS: _____

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The undersigned certifies that all information supplied with regard to this application is true to the best of his/her knowledge and belief. It is understood that this license may be revoked for any substantial departure from this application or from the conditions of approval, for refusal or failure to comply with the requirements of state and local laws, for false statements or misrepresentations made in securing the license, or for other unlawful reasons.

Authorized Signature of Applicant

Printed Name of Signatory

Date

*******FOR COUNTY USE ONLY*******

I have inspected the facilities and equipment described in the foregoing application, and find that the same conform to Guilford County Environmental Services requirements.

APPLICANT: _____

INSPECTION DATE

INSPECTOR

ENV. SRVCS. PROG. MGR.