

PERMIT # \_\_\_\_\_



# TOWN OF FALLSBURG REFUSE HAULER'S APPLICATION



FEE: \$ \_\_\_\_\_

LICENSE EXPIRES APRIL 30th, \_\_\_\_\_

1. Company Name: \_\_\_\_\_
2. Owner's Full Name: \_\_\_\_\_
3. Address: \_\_\_\_\_
4. Phone : \_\_\_\_\_
5. Insurance Carrier: \_\_\_\_\_
6. Policy Number: \_\_\_\_\_

Year	Make/Model	VIN #

Inspection of Refuse Hauling Truck (s) Conducted on: \_\_\_\_\_

Passed: \_\_\_\_\_

Failed: \_\_\_\_\_

Name of Officer Who Completed Inspection: \_\_\_\_\_

Signature: \_\_\_\_\_

*I, the undersigned, state that all the information I have given in the foregoing application is true to the best of my knowledge, information and belief.*

Owner's Signature: \_\_\_\_\_

Town Clerk: \_\_\_\_\_

Date: \_\_\_\_\_



PERMIT # \_\_\_\_\_

# TOWN OF FALLSBURG REFUSE HAULER'S PERMIT

EXPIRES APRIL 30th, \_\_\_\_\_

Company Name: \_\_\_\_\_

Owner's Full Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Year	Make/Model	VIN #

Inspection of Hauling Truck (s) Completed and Approved:

Date: \_\_\_\_\_

Officer's Signature: \_\_\_\_\_

\_\_\_\_\_  
Company Owner Signature    Date

\_\_\_\_\_  
Town Clerk                      Date

