

WASTE HAULER LICENSE APPLICATION  
FOR THE YEAR OF  
**20**\_\_\_\_\_

BUSINESS NAME: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

PHONE: \_\_\_\_\_ CONTACT NAME: \_\_\_\_\_



***TO BE SUBMITTED WITH APPLICATION:***

- \$150.00 LICENSE FEE Check No. \_\_\_\_\_
- LIST OF MOTOR VEHICLES  
Including a description of each motor vehicle and license plate number
- CERTIFICATE OF INSURANCE  
Provide proof of insurance for each vehicle used within the City limits

*On issuance of a garbage hauler license, I agree to comply with all the ordinances that apply of the City of Albertville for which this license is issued.*

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Date*

**NOTE: PLEASE MAIL ALL INFORMATION AT ONE TIME. DON'T SEND APPLICATION AND FEE THEN SEND INSURANCE 3-5 DAYS LATER. WE NEED ALL INFORMATION AT THE SAME TIME PLEASE.**