

**WARRICK COUNTY RECYCLING & RESOURCE MANAGEMENT DISTRICT
BUSINESS/COMMERCIAL
RECYCLING PROGRAM APPLICATION**

Business/Organization Name: _____

Address:

Street: _____ **City:** _____ **Zip Code:** _____

Business Phone #: _____

Contact Person: _____

Cell # _____

Items To Be Recycled:

Plastic Bottles: _____ **Aluminum Cans:** _____ **Office Paper:** _____

News Paper: _____ **Cardboard:** _____ **Metal Cans:** _____

Container Size:

5 gallon Desk Top: _____ # **40 Gallon cardboard Boxes:** _____ #

Color Coordinated Laundry Totes: _____ **Larger Totes: (Cardboard Only)** _____

Frequency of Collection:

Daily: _____ **Weekly:** _____ **Monthly:** _____ **Other:** _____

Call when containers are full for collection: _____

The undersigned acknowledges that the information provided is accurate to the best of their knowledge. Further it is understood that this is a Voluntary Program offered without cost. All containers and equipment remain the property of the Warrick County Recycling & Resource Management District (District). As such the Organization may cancel participation in this program at any time. At such time the District will remove its equipment within 2 weeks of cancelation. The Undersigned agrees to hold harmless the District for injury, accidents or damage resulting from the misuse or operation of its equipment. Further: The undersigned agrees to comply with the provisions as attached to this form.

The District asks that the Organization Contact the District 2 days before collection is needed in order to avoid scheduling conflicts.

Signed:

Signature: _____

Printed Name: _____

Position Title: _____

Date: _____

For Administrative Use Only:

Program Approved: _____ Date Bins Delivered: _____

Implementation Date: _____

1. Cardboard/Boxes & Board Containers are to be broken down before being placed into the recycling containers.
2. Do not comingle recycled materials in your recycling bins unless otherwise authorized to do such by the District Representative.
3. If your bins are stored outside you agree to store all bins with the lids closed.
(This keeps moisture and insects out of the bins)
4. If you have any questions please contact the District at 812-897-6155 and ask for; Michele Wallace, Operations Manager.

Warrick County Solid Waste Management District
(DBA: Warrick County Recycling & Resource Management District)
1111 S. Pelzer Road
Boonville, IN 47601
Phone #: (812)897-6155
Email:Warrickrecycles.org