Fee: \$60.00 Annually

Town of New Durham, NH 4 Main St., P.O. Box 207 New Durham, NH 03855-0207

Telephone: (603) 859-2091 Fax (603) 859-6644 www.newdurhamnh.us

Application for Trash Hauler Permit

This application must be filed with the appropriate fees payable to: Town of New Durham

This application mus	st be med with the appropria	ate ices payable to. Town of frew	Bullani	
APPLICANT INFO	ORMATION (please print	clearly)		
Business Name				
Business Address				
		Phone		
VEHICLE INFORM	MATION			
License				
<u>Plate #</u>	<u>Make</u>	<u>Year</u> 	<u>Color</u>	
GENERAL DESCR OVER THESE RO		ECTION ROUTE AND FREQU	JENCY OF COLLECTIONS	
Number of Resident	ial Customers	Number of Commercial	Customers	
Trainber of Residents		rumber of commercial	Customers	
<u>AFFIDAVIT</u>				
application is not train recyclable materials with reuse of said materials.	lication is true and accurate nsferable or assignable to an will be disposed of in accord erials, and that all trash left	,as the business owner, do . I fully understand that any permother person or company. I guar lance with the recycling program, at the Solid Waste Facility comes result in loss of the privilege to open	mit issued pursuant to this rantee that all collected in a manner that will maximize from New Durham residents.	
Signature of Applicant		Date	Date of Application	
Town Clerk Office use only. §	3 Copies (Applicant, Town Clerk and Sol	id Waste Facility)		
Signature Town Clerk or Dep	outy Town Clerk		Date Received	
Amount Received		Cash / Check No	Cash / Check No	
Temporary Permit No		Only Valid From to		