

# APPLICATION FOR RELIEF FROM SANITATION FEES

No. **RS**

Date : \_\_\_\_\_ , 20 \_\_\_\_

Applicant : \_\_\_\_\_

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

City : \_\_\_\_\_ St. : \_\_\_\_ Zip Code : \_\_\_\_\_

Telephone : ( \_\_\_\_ ) \_\_\_\_\_

1. Type of refuse service : \_\_\_\_ Residential \_\_\_\_ Commercial / Industrial

2. If Residential -

a. Address of present service : \_\_\_\_\_

b. Do you live at this address : \_\_\_\_ Yes \_\_\_\_ No

c. How will you dispose of :

1. Garbage : \_\_\_\_\_

2. Grass, Leaves, Brush : \_\_\_\_\_

If Commercial -

a. Name of business : \_\_\_\_\_

b. Address of present service : \_\_\_\_\_

c. How will you dispose of refuse : \_\_\_\_\_

3. Where will you dispose of above material(s): \_\_\_\_\_

4. Is #3 a State Approved Disposal Site : \_\_\_\_ Yes \_\_\_\_ No

5. Do you use Light, Water and Sewer service : \_\_\_\_ Yes \_\_\_\_ No

6. Reason you receive no benefit from Sanitation Service : \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Applicants Signature

The foregoing application was subscribed and sworn before me this \_\_\_\_\_ day of \_\_\_\_\_ , 20 \_\_\_\_ .

STATE OF NEBRASKA  
County of Jefferson

\_\_\_\_\_  
Notary Public

S E A L

\_\_\_\_\_  
Commission Expires \_\_\_\_\_ , 20 \_\_\_\_