

Montgomery County Department of Environmental Protection Recycling and Resource Management Division

APPLICATION FOR SOLID WASTE LICENSE



Submit form to: 16101 Frederick Road, Derwood, MD 20855

Please Remit \$25 Application Fee Made Payable to: Montgomery County, Maryland

License Type: (For Office Use Only)						
<u>Date Received</u>						
License Type:						

License Information Name of Business Trade Name or DBA **Business Address** Zip Code City State **Phone Number** Fax# **Mailing Address** Zip Code City State **Phone Number Company Website** Type of Business - Check One Years in Business Sole Proprietorship **General Partnership** Corporation Limited Partnership State of Formation Limited Liability Corporation (LLC) Limited Liability Partnership (LLP) Date of Formation **Business Trust** Limited Liability Limited Partnership Name(s) of Owner(s), Corporate Officer(s), Member(s), or Partner(s) Last Name First Name Initial **Mailing Address** Zip Code City State **Phone Number** Fax# E-Mail **Contact Person for the Business** Last Name First Name Initial **Mailing Address** Zip Code State City Cell Number Fax# E-Mail



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RESID	ENT AGENT - Required for all Corporations, L and Limited Liability Limited Po	•	Companies, Limited	Liability Partner	ships, Limited	Partnerships,
Name 8			Phone #		Fax #	
Addres	s		City		State	Zip
E-Mail	Address					
Туре о	f Service Provided	Residentia	ICollection Mul	lti-Family Collection	on Constr	uction & Demolition
<u>Staten</u> are app	nent of Service - In the space below please proviouslying: (1) Type of waste to be hauled, collected, or trans (2) Materials not accepted; (3) Size & Type of solid waste containers; (4) Estimated annual amount of material that wing (5) Any other information necessary to establish	ported; II be discarded,	and the geographic	al areas from wh	ich the solid w	raste will be hauled;
	By checking this box, I agree that the compar Chapter 48 of the Montgomery Code and all a additional information regarding the County's http://www.montgomerycountymd.gov/swstm	opplicable reg solid waste re	ulations. I further a equirements can be	cknowledge the found at the I	at I have bed ink below.	en notified that
	I declare and affirm, under penalty of perjuand facts in this application are true and co	-				
(Signatur	of Corporate President, Managing Member, Partner, or Owne	r Listed on Page 1	of this application)			
Name		Title		Sig	gnature Date	