

I DISPOSE OF MY TRASH AT MY OWN BUSINESS OR PLACE OF EMPLOYMENT:

- _____ 1. Once a week at a place of business owned at least in part by myself and/or my spouse
_____ 2. Once a week at my place of employment

The following information relates to the business/place of employment where the household waste will be collected/disposed:

1. Address: _____
2. Frequency of trash pick-up: _____
3. Name and phone number of disposal firm serving premises:

Name of Firm Phone Number

4. Customer or service account number:

5. Above account billed in the name of: _____

6. If the above service is not billed to your firm, the signature and phone number of the person/firm whose name appears on the account must be provided below. Their signature will serve as proof that they have consented to your using this account for collection and disposal of household waste.

Signed Firm

7. I certify that all waste from my place of residence will be properly handled, collected and disposed of at least once a week in containers found at the above address. I also understand that, should it be approved, this exemption may be revoked by the City, for good cause, subject to a notice explaining why.

Signature Date

MY PROPERTY WILL BE VACANT FOR AT LEAST ONE MONTH OR I DISPOSE OF TRASH IN ANOTHER MANNER:

_____ 1. My property will be vacant for at least one month from the date of this application. **(I will take the responsibility for re-initiating trash collection with EDCO when my property is no longer vacant.)**

Signature

Date

_____ 2. Other. Please describe in detail what process you will use to dispose of trash below. Requirements for this exemption class will vary, depending upon the circumstances involved. Please summarize how you presently dispose of trash in the space provided below, sign and date this section and return to the address shown below:

I certify that: _____

Signature

Date

WHEN COMPLETED, MAIL THIS FORM TO:

CITY OF VISTA – P.W. – TRASH EXEMPTIONS
1165 E. TAYLOR STREET
VISTA, CA 92084-3303
760/726-1340 x1604 – phone
760/726-5561 - fax