



Solid Waste Maintenance Request Form

Please Return this form to the EPA Department

1490 Soda Bay Road
707-263-3924 ext. 131

Name: _____ Date: _____
(please print)

Address: _____ Phone: _____

Needed date of completion: _____ Location on property: _____

Is haul trailer needed? _____ If yes, for how long? _____

Kind of waste/how much: _____

Please Note: By signing below you are agreeing to sole responsibility for any and all costs incurred in the fulfillment of this solid waste disposal request.

Requestor's Signature: _____ Date: _____

Staff Approval: _____ Date: _____

This Section Completed by Staff Only

Date Completed: _____

Description of trash hauled: _____

of loads of trash: _____

Description of recycling hauled (if any): _____

of loads of recyclable plastics: _____ # of loads of metal: _____ # of loads of cardboard: _____

Appliances: _____ Electronics: _____

Ticket #'s: _____ Coding: _____

Description of construction/demolition waste hauled (if any): _____

Green waste hauled (if any): _____

Other: _____

Notes: _____

