

**Preble County General Health District
615 Hillcrest Drive, Eaton, OH 45320**

APPLICATION TO REGISTER FOR SOLID WASTE COLLECTION

Name _____

Address _____ Phone _____

Email _____

I hereby apply for a permit to engage in the collection and removal of solid waste in the Preble County General Health District.

I agree to comply with the rules and regulations of the Board of Health of the Preble County General Health District governing the collection, storage, removal, and hauling of solid waste.

I further agree to dispose of all materials by methods approved by the Health Commissioner.

Total number of vehicles:

Number of packers _____ Capacity _____

Number of open beds _____ Capacity _____

Number of covered beds _____ Capacity _____

Area of be served _____

Applicant

Date _____

Permit Number _____

Permit Issued _____