

City of Warrenville

3S258 Manning Avenue
Warrenville, IL 60555
(630) 393-9427 (630) 393-5053 FAX

SCAVENGER LICENSE APPLICATION FOR THE COLLECTION OF REFUSE

(According to Title 6, Chapter 2 of the City Code)

Name of Applicant: _____

Address: _____ Phone: _____

City: _____ State: _____ Zip: _____

If a partnership or corporation, list names and addresses of officers and owners of corporation:

1. Name: _____ Office Held: _____

Address: _____ % of Stock Held: _____

City: _____ State: _____ Zip: _____

2. Name: _____ Office Held: _____

Address: _____ % of Stock Held: _____

City: _____ State: _____ Zip: _____

List vehicles to be used in the City:

Type: _____ License #: _____

The undersigned hereby makes application for a City of Warrenville Scavenger License from May 1, _____ to April 30, _____ inclusive and tenders herewith a fee for such license in the sum of \$750.00.

Also enclosed is a Certificate of Insurance naming the City as co-insured.

Applicant further states that he will meet the requirements of the City Code and that all statements above are true.

Signature of Applicant

Signature of Co-Partner or President

Signature of Co-Partner or Secretary

