

	PW – Landfill Permit Application	Public Works
	<b>Landfill Permit Application</b> <b>Robin Hood Bay Waste Management Facility</b>	

Contact and Billing Information	<b>SECTION 1</b>
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<b>Contact Information</b>  Company Name _____ Contact Name _____ Address _____ City/Town _____ Postal Code _____ Telephone (work) _____ Telephone (cell) _____ Email _____	<b>Billing Information</b>  Same as Contact Information  Company Name _____ Contact Name _____ Address _____ City/Town _____ Postal Code _____ Telephone (work) _____ Telephone (cell) _____ Email _____
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Application Type	<b>SECTION 2</b>
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I am applying for:

New permit     
 Replacement of lost/damaged permit     
 Renewal of Existing Permit(s)

**A copy of the vehicle registration must be submitted with this application for new permits.**

If this is a renewal or replacement, please indicate permit number(s):

\_\_\_\_\_

Is this a rental vehicle?      Yes      No

If yes, a copy of the rental agreement must be submitted with this application.

Vehicle Information	<b>SECTION 3</b>
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Vehicle Make \_\_\_\_\_ Model \_\_\_\_\_ Year \_\_\_\_\_

License Plate # \_\_\_\_\_ Tare Weight (kg) \_\_\_\_\_

<b>PW – Landfill Permit Application</b>	<b>Public Works</b>																				
Vehicle Information continued	<b>SECTION 3</b>																				
<p>Vehicle Type:</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 25%;">1. Pickup</td> <td style="width: 25%;">2. Stake Body</td> <td style="width: 25%;">3. Dump Truck-Single</td> <td style="width: 25%;">4. Dump Truck-Tandem</td> </tr> <tr> <td>5. Dump Truck -Tandem/Tandem</td> <td>6. Rear Loader-Single</td> <td>7. Rear Loader-Tandem</td> <td></td> </tr> <tr> <td>8. Side Loader-Single</td> <td>9. Side Loader-Tandem</td> <td>10. Front Loader</td> <td></td> </tr> <tr> <td>11. Roll Off</td> <td>12. Van</td> <td>13. Flat Bed</td> <td>14. Tractor Trailer</td> </tr> <tr> <td colspan="4">15. Other please describe _____</td> </tr> </table> <p>Origin of Waste (municipality) _____</p>		1. Pickup	2. Stake Body	3. Dump Truck-Single	4. Dump Truck-Tandem	5. Dump Truck -Tandem/Tandem	6. Rear Loader-Single	7. Rear Loader-Tandem		8. Side Loader-Single	9. Side Loader-Tandem	10. Front Loader		11. Roll Off	12. Van	13. Flat Bed	14. Tractor Trailer	15. Other please describe _____			
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Applicant Declaration	<b>SECTION 4</b>																				
<p>I hereby certify that the information provided by me on this application is complete and accurate and that I have read the provided documentation entitled "Information for Commercial and Municipal Users of Robin Hood Bay Waste Management Facility", and understand the provisions as listed in Section 28 of the City of St. John's Sanitation Regulations.</p> <p>Signature _____ Date (yyyy-mm-dd) _____</p>																					
<b>Internal Use Only (to be completed by City Staff)</b>	<b>SECTION 5</b>																				
<p>Customer Name _____ Customer Number _____</p> <p>Truck # _____ Expiry Date (yyyy-mm-dd) _____</p> <p>Office Personnel _____ Date (yyyy-mm-dd) _____</p>																					
Privacy Notice	<b>SECTION 6</b>																				
<p>Collection of personal information via this form is authorized under the Access to Information and Protection of Privacy Act, 2015 and is needed to process your application. Questions about the collection and use of the information may be directed via email to <a href="mailto:robinhoodbay@stjohns.ca">robinhoodbay@stjohns.ca</a> or by phone to 311 or 709-754-2489.</p>																					
Please send completed form to:	<table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">Access St. John's, 1<sup>st</sup> Floor City Hall P.O. Box 908, 10 New Gower Street St. John's, NL A1C 5M2</td> <td style="width: 33%;">For further information: Phone: 709-754-2489 Email: <a href="mailto:access@stjohns.ca">access@stjohns.ca</a></td> </tr> </table>	Access St. John's, 1 <sup>st</sup> Floor City Hall P.O. Box 908, 10 New Gower Street St. John's, NL A1C 5M2	For further information: Phone: 709-754-2489 Email: <a href="mailto:access@stjohns.ca">access@stjohns.ca</a>																		
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