

Tioga County Sustainability

Annual Private Waste Hauler Permit Application - 2025 (Please type or print legibly)

ALL sections must be completed for this application to be approved

If a section does not apply, indicate this by writing "NA". Do NOT leave blank spaces.

Application Date: _____

Name of Applicant: _____ Phone: _____

Street Address: _____ City: _____ Zip: _____

Mailing Address: _____ City: _____ Zip: _____

Contact Person: _____ Email Address: _____

Federal ID#: _____ Type of ownership: _____
(Corp., Partnership, Sole proprietor)

Assumed name if the applicant does business under more than one name:

Names of all Partners, Officers and Directors (use additional pages if needed): _____

List all disposal facilities to which the applicant will deliver solid waste and recycling delivered:

Facility (name and location)

Type of Waste (MSW, C&D, Recycling)

Please mail a nonrefundable annual application fee of \$100 (make check payable to Tioga County Treasurer) accompanied with certificate of insurance to Tioga County Solid Waste, 56 Main Street, Owego, NY 13827.

In accordance with Local Law No. 5 of 2023 – Mandatory Source Separation Law, more information may be requested by the Sustainability Manager.

Has the applicant, any owner, partners, directors or officer ever been convicted of a misdemeanor or felony violation of any federal, state or local law pertaining to the collection or disposal of solid waste? (check one)

Yes No

If you answered yes, please provide details below.

The undersigned certifies on behalf of the applicant that the information contained in the application is true and correct. The undersigned further certifies that the applicant is fully aware of requirements of private waste haulers under NYSDEC and Local Law No. 5 of 2023 – Mandatory Source Separation Law rules and regulations within Tioga County.

Print name and title of person signing on behalf of the applicant:

NOTICE

(Penal Law, Sec. 210.45)

It is a crime, punishable as a Class A Misdemeanor under the Laws of the State of New York, for a person, in and by a written instrument, to knowingly make a false statement, or to make a statement which such person does not believe to be true.

I _____ affirm under penalty of Law that the statements and facts contained within this document are true and correct.

Owner / Applicant signature _____ Date _____
(circle one)

(Title)

(Name of business)

Plate# - The license plate number issued to this vehicle.

Vehicle Make – The manufacturer of the vehicle i.e. Mack, International, etc.

Type – Is the vehicle a split body garbage truck or pick-up truck or anything in between.

VIN# - Vehicle Identification Number.

Insurance – Insurance company and policy number.

Unl. Weight – The unladen weight listed on the registration.