2019 SOLID WASTE SERVICES PERMIT
(Includes C&D and Recycling Services)
FILING INFORMATION

PLEASE NOTE: Fees for 2019 Permits
Permit Application and First Truck - $750.00
Each Additional Truck - $250.00
Sticker Fee – (All containers/roll offs used in the Town) $  7.50

1) Completed applications should be typed or printed and MUST be submitted for review by November 13, 2018.

2) Customer List Requirements – See CHECK LIST for information and required specifics FOR EACH CUSTOMER.

3) If setting up a billing account, applicant must submit a Surety Bond or Certified Check in the amount established by the Commissioner (see below). (MUST USE ATTACHED BOND FORM). Any permittee who fails to pay a tip fee invoice prior to the issuance of a subsequent invoice twice in a twelve month period or whose outstanding balance exceeds the Surety Bond/Certified Check amount, shall be denied entrance to Town facilities, and faces suspension or revocation of said permit.

   Permit Applicant: __________________
   2019 Surety Amount: (If setting up billing account) $____________________

4) Applicants must attest that all containers and permitted vehicles are lettered with the name and telephone number of the permit holder on each side of the vehicle/container in letters at least six (6) inches high. Containers should also show volume of the container, in cubic yards.

5) For each vehicle submitted: current registration; insurance card; Board of Health Certificate for applicable vehicles (e.g., front or rear loaders, compactors).

6) Provide current proof of Workers' Compensation and Disability Insurance, OR NYS Affidavit CE 200 – Completed and SIGNED – waiving company requirement to provide coverage under these Laws. (Form can be found on internet www.wcb.ny.gov )

7) Effective January 1, 2019, no vehicle will be permitted to service accounts in Islip or enter Town facilities without the proper permit emblem affixed. No Containers (roll-offs, compactors, etc.) shall be placed in the Town of Islip without the proper sticker affixed. Persons providing service within Islip using vehicles without permit emblems or containers without stickers shall be considered as providing solid waste services without a permit in violation of Islip Town Code §21-9.

Enclosed: Application Check Sheet
          Permit Application
          Surety Bond Form and Acknowledgment Form
          “Compliance Letter”
          Truck Change Forms
APPLICANT CHECKLIST
FOR
SOLID WASTE SERVICES PERMIT

PAGES 7 AND 8 MUST BE COMPLETED BY COMMERCIAL CARTERS AND RECYCLERS, AND MUST BE SUBMITTED NO LATER THAN 45 DAYS AFTER PERMIT APPROVAL

IF A QUESTION DOES NOT APPLY, ANSWER WITH N/A.

BE SURE YOU HAVE INCLUDED ALL OF THE FOLLOWING:

☐ One original completed application.
☐ Notarized Letter on Company Letterhead attesting to current customer list for all Islip customers receiving regular commercial municipal solid waste collection services from the applicant.

CUSTOMER LIST REQUIREMENT – A Customer List must be provided by the applicant for all customers in Islip receiving regular commercial municipal solid waste collection service from the applicant. Information regarding customers receiving intermittent or temporary service for collection of construction and demolition debris, or customers served through contracts with the Town’s special garbage and refuse districts need not be provided. All data must be provided in electronic format (comma delimited ASCI file – CSV or Microsoft Excel compatible) and separated as shown. File can be emailed to Rdente@townofislip-ny.gov or sent by disc with your completed application. PLEASE SEE ATTACHED CUSTOMER LIST SAMPLE.

☐ If setting up a billing account – Surety Bond – SIGNED, SEALED, ACKNOWLEDGMENTS attached.
☐ Notarized Compliance Letter – stating services provided will be in accordance with Chapter 21 of the Town Code, as well as permitted vehicles/containers. (See enclosed sample.)
☐ Current Registration and Insurance card for each permitted vehicle.
☐ Notarized Fee Responsibility Letter – If vehicle registration is in name of other than applicant company, stating that applicant company is responsible for any tipping fees incurred by truck owner (name as stated on registration). (See enclosed sample.)
☐ Current Year Board of Health Certificate listing EACH permitted vehicle for which a certificate is required (e.g. front or rear loaders, compactors).

COMPLETED APPLICATIONS WILL BE ACCEPTED MONDAY THROUGH FRIDAY, FROM 9:00 A.M. TILL 4:00 P.M.
TOWN OF ISLIP
Department of Environmental Control
401 Main St., Islip, NY 11751

2019 APPLICATION FOR SOLID WASTE SERVICES PERMIT
THIS INCLUDES CONSTRUCTION & DEMOLITION DEBRIS AND RECYCLING MATERIAL

The issuance of a permit shall bind the applicant to comply with all conditions, rules and regulations of Chapter 21, Solid Waste of the Code of the Town of Islip as in effect during the period covered by said permit. The applicant company further acknowledges the right of the Commissioner of Environmental Control to enforce the provisions of said Code and Section 2046-t (3) of the Public Authorities Law, and understands that compliance with same is a condition of the said permit.

COMPANY NAME (Applicant): __________________________________________

MAIL ADDRESS: ______________________________________________________

CITY: _____________________________ STATE: __________________ ZIP: ______

STREET ADDRESS: __________________________________________________
(If P. O. Box, or different from Mail Address, you MUST list Street Address)

CITY___________________________ STATE __________________ ZIP________

CONTACT PERSON: ________________________________ TITLE: ____________________
(full name)

OFFICE PHONE: (____)____________________ HOME PHONE: (____)______________

FAX: (____)_________________________ CELL PHONE: (____)____________________

E-MAIL ADDRESS: ______________________________

GARAGE LOCATION(S): ______________________________

ADDITIONAL CONTAINER STORAGE YARD(S): ________________________________

SERVICES PROVIDED: (Check All That Apply)

☐ RESIDENTIAL ☐ COMMERCIAL ☐ C&D ☐ RECYCLING MATERIAL

☐ OTHER (briefly explain) ____________________________________________________

LIST MUNICIPALITIES WHERE YOUR COMPANY IS LICENSED TO PROVIDE COLLECTION SERVICES:
____________________________________________________________________________
____________________________________________________________________________

1
Has any individual applicant, partnership, officer, director, member or any person holding 5% or more financial interest in said business or corporation, ever been convicted of a crime, or committed any violation of any federal or state environmental law or regulation for which a civil sanction, penalty or judgment was imposed, or is currently charged with the commission of any crime, other than a traffic violation?  YES ☐ NO ☐ If yes, indicate details (date, location, disposition).

___________________________________________________________________________

____________________________________________________________________________

List all officers by name and title, and all persons with a financial interest in the company, as follows: If a partnership, corporation, or LLC, list the names of all partners, officers, directors, or managing members as well as all individuals with a 5% interest or more in the applicant. If a publicly traded corporation or wholly owned subsidiary thereof, submit a copy of the corporation’s most recent Annual Report or SEC filing indicating the ownership of the corporation and subsidiary.

NOTE: If a change of Officer, Director or other Holder of 5% interest occurs during the permit year, this information must be disclosed to the Town of Islip within ten (10) days of the change.

<table>
<thead>
<tr>
<th>Name and Title of Officer/Owner/Director</th>
<th>SS#</th>
<th>Date of Birth</th>
<th>Home Address</th>
<th>% of Interest Held</th>
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<tr>
<th>Name and Title of Other Holder of 5% or More Interest</th>
<th>SS#</th>
<th>Date of Birth</th>
<th>Home Address</th>
<th>% of Interest Held</th>
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Is the applicant corporation or partnership wholly or partially owned by another entity?  YES ☐ NO ☐

If yes, please list and identify the parent entity and list the officers, directors and/or managers on a separate sheet of paper.
DISPOSAL INFORMATION

The applicant hereby acknowledges the application of Islip Town Code §§21-7 and 21-10 governing disposal of solid waste generated within the Town of Islip and hereby requests authorization pursuant thereto to dispose of solid waste, construction and demolition debris and commercial recyclables at the facilities set forth below, each of which is lawfully permitted and authorized to accept the materials indicated:

ISLIP FACILITIES TO BE USED:  (Check All That Apply):

☐ MacArthur Resource Recovery Facility (Solid Waste)
☐ Sayville Recycling Facility (Recyclables)
☐ MacArthur Composting Facility (Yard Waste/Land Clearing Debris)
☐ Blydenburgh Cleanfill Facility (Construction/Demolition Material)

ALTERNATE FACILITIES TO BE USED:

<table>
<thead>
<tr>
<th>Name and Address (WTE facility, trans station etc.)</th>
<th>Material Delivered (MSW, C&amp;D, Recyclables)</th>
<th>Permitting Agency &amp; Permit # (NYDEC, PaDEP etc.)</th>
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Pursuant to §21-3 of the Islip Town Code, the Commissioner has designated corrugated cardboard-OCC, newspapers-ONP; glass jars and bottles; plastics- PET HDPE; cans-Fe; Bulk Metals and Aluminum-AL as materials capable of being re-used or recycled pursuant to General Municipal Law §120-aa.

The applicant hereby acknowledges the designation of these materials as recyclable pursuant to ITC §21-3, and, as a condition of the applicant’s authorization to use the alternate disposal Facilities identified above, the applicant hereby represents that i) separate collection service for said recyclables shall be provided on commercially reasonable terms to all commercial customers requesting same, and ii) the applicant shall submit, not later than 45 days after the effective date of this permit, an Annual Report, setting forth the recycling activities of the applicant in the previous year. The Annual Report shall summarize the amounts of all source-separated recyclables collected by the applicant in the prior year, and the amounts of all recyclables recovered from any facility utilized to recover recyclables that are commingled with other solid wastes. The Annual Report shall be substantially in the sample form annexed hereto (pages 7 & 8).

(For Town Use Only)

Special Conditions of Permit

________________________________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________

_____ Approved

_____ Denied

__________________________

Martin J. Bellew, Commissioner
TOWN OF ISLIP
DEPARTMENT OF ENVIRONMENTAL CONTROL
2019 SOLID WASTE PERMIT APPLICATION
VEHICLE INFORMATION

NAME OF COMPANY: ____________________________________ Client # ______________

LIST ALL VEHICLES TO BE USED IN ISLIP

<table>
<thead>
<tr>
<th>Year</th>
<th>Body Type</th>
<th>Make &amp; Model</th>
<th>License Plate #</th>
<th>Vehicle I.D. #</th>
<th>2018 ISLIP DECAL #</th>
<th>2019 DECAL (Town Use Only)</th>
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Current registration and insurance required for each vehicle permitted.

FEES: $750.00 PERMIT AND FIRST VEHICLE
$ ________ $250.00 EACH ADDITIONAL VEHICLE
$ ________ $ 7.50 EACH STICKER _____ Number of stickers requested
$________
TOTAL FEE ATTACHED

(For office use only) STICKER NO(S) ________________________________

_________________________________________________ __________________________
Signature Date plates and stickers received

ADD’L. TRUCKS – number of additional trucks ______@ $250 each $________

_________________________________________________
Signature Date
___________________________________________, being duly sworn, deposes and says that he/she is the _____________________of ___________________________________________, the applicant herein; that all the information submitted with this application is true; that the applicant agrees to comply with all provisions of Chapter 21 of the Code of the Town of Islip which regulates the collection and disposal of solid waste; that the applicant understands that failure to comply with the rules and regulations of the Town of Islip or any false statements made on any part of this application shall be grounds for denial and/or revocation of this permit.

___________________________________________
SIGNATURE

___________________________________________
PRINTED NAME

SWORN TO BEFORE ME THIS _____
DAY OF ________________, 20___

NOTARY PUBLIC ________________________

ACTION BY TOWN CLERK:

(B) Approved: Permit No. _________ expires: December 31, 20___

(B) Disapproved: ______________________________
**COMMERCIAL CARTERS AND RECYCLERS MUST KEEP PAGES 8 AND 9**
*To be completed and submitted no later than 45 days after permit approved*

**COMPANY NAME:** ________________________________

**ANNUAL REPORT ON RECYCLING ACTIVITY**

**MATERIALS RECOVERED - PRIOR YEAR**

**SECTION I (A)** Provide information for recyclables *collected separately* from solid waste for the PRIOR PERMIT YEAR. For each type of solid waste recovered, provide the weight in tons.

<table>
<thead>
<tr>
<th>TYPE OF MATERIAL RECOVERED (for Prior Permit Year)</th>
<th>TOTAL TONS FOR YEAR 20______</th>
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<tbody>
<tr>
<td>Cardboard (OCC)</td>
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<tr>
<td>Newspapers (ONP)</td>
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<tr>
<td>Glass Bottles/Jars (Glass)</td>
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<td>Plastic (PET/HDPE)</td>
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<td>Bulk Metals</td>
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<td>Other – (Specify)</td>
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**SECTION I (B)** As required pursuant to Chapter 21-10 B. (1) (c), please identify the buyers or markets who purchase the separately collected materials listed above.

<table>
<thead>
<tr>
<th>Materials Extracted</th>
<th>Buyers/Markets</th>
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<tbody>
<tr>
<td>Cardboard</td>
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<td>Glass</td>
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<td>Metals</td>
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<td>Other</td>
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7
**SECTION II (A)** List all commercial and multi-family residential customers for which the applicant provides recycling services through *post-collection extraction* of recyclable materials at a licensed transfer station/recycling center.

*If all recycling services are through post-collection extraction, you can indicate as such by stating “SEE CUSTOMER LIST” in the space below.*

<table>
<thead>
<tr>
<th>Customer Name and Address</th>
<th>Volume Collected Monthly</th>
<th>Materials to be Extracted</th>
<th>Approx. Percent Recycled</th>
<th>Est. Vol. Residual Waste</th>
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Please attach additional pages if needed.

**SECTION II (B)** As required pursuant to Chapter 21-10-B (1) (d), please identify the facility and method to be employed to extract the recyclables from the solid waste collected.

<table>
<thead>
<tr>
<th>Facility Name and Address</th>
<th>NYSDEC Permit</th>
<th>Extraction Method</th>
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Please attach additional pages if needed.

COMPANY NAME: _______________________________________ DATE: ________________

SIGNATURE: __________________________________________ PRINT NAME: ____________________

8
SURETY BOND FORM

BOND NO. ________________

KNOW ALL MEN BY THESE PRESENTS: That we, the undersigned
______________________________________________ as Principal, and ____________________________________________
__________________________________________ corporation, having an office
at ___________________________________________, as Surety, are held and firmly bound
unto the Town of Islip, 401 Main Street, Islip, New York, 11751, as obligee in the penal sum of
__________________________________________________ ($_________________) Dollars, lawful money of the United States of America, to be paid to the said Town of
Islip for which payment well and truly to be made, we bind ourselves, or heirs, executors, and administrators,
successors and assigns jointly and severally firmly by these presents.

SIGNED, sealed and dated this ___________ day of ____________________________

WHEREAS, the above Principal has been or is about to be granted permission to maintain a
monthly account with the Town of Islip in the payment of fees for use of Town solid waste disposal facilities,
which permission is to be granted conditioned that the Principal should furnish and file with the Town of Islip a
bond in the sum of ____________________________________________ ($_______________) Dollars for the payment of all fees assessed by the Town of Islip in consideration for
the Principal's use of such place or places designated as disposal sites within the Town of Islip, (and as financial security pursuant to
Chapter 21 - 10-B-(1)-(a) 5 for the period January 1, _____ to December 31, _____ inclusive.

NOW, THEREFORE, the condition of this obligation is such that if the Principal shall well and truly
make due and timely payment to the Town of Islip the amount of assessed fees as promulgated by the Town of
Islip for use of such place or places designated as disposal sites, then this obligation shall be null and void,
otherwise to remain in full force and effect. In order to be considered timely, payment must be made within
thirty (30) days of the billing date.

Affix
Corporate Seal
BY ____________________________ (PRINCIPAL)

Affix
Surety Seal
BY ____________________________ (SURETY)
INDIVIDUAL ACKNOWLEDGMENT

State of ______________________}   ss.
County of _____________________

On this _____________day of ______________________, 20 ____, before me personally came
_________________________________________________________ to me known, and known to me to be the individual described in and who executed
the foregoing instrument, and acknowledged to me that he executed the same.

My commission expires _____________________                             _____________________________________________
                                                                                           Notary Public

FIRM ACKNOWLEDGMENT

State of ______________________}   ss.
County of _____________________

On this _____________day of ______________________, 20 ____, before me personally came
_________________________________________________________ to me known, and known to me to be a member of the firm of
________________________________________________________ described in and who executed the foregoing instrument, and he
thereupon acknowledged to me that he executed the same as and for the act and deed of said firm.

My commission expires _____________________                             _____________________________________________
                                                                                           Notary Public

CORPORATION ACKNOWLEDGMENT

State of ______________________}   ss.
County of _____________________

On this _____________day of ______________________, 20 ____, before me personally came
________________________________________________________ to me known, who being by me duly sworn, did depose and say
that he is the ______________________ of ___________________________________________________________________________ the
corporation described in and which executed the above instrument; that he knows the seal of said corporation; that the seal affixed to said instrument
is such corporate seal; that it was so affixed by order of the Board of Directors of said corporation, and that he signed his name thereto by like order.

My commission expires _____________________                             _____________________________________________
                                                                                           Notary Public

SURETY ACKNOWLEDGMENT

State of ______________________}   ss.
County of _____________________

On this _____________day of ______________________, 20 ____, before me personally came
________________________________________________________ to me known, who, being by me duly sworn, did depose and say that he is
an attorney-in-fact of ___________________________________________________________________________ the corporation described
in and which executed the within instrument; that he knows the corporate seal of said corporation; that the seal affixed to the within instrument is
such corporate seal, and that he signed said instrument and affixed the said seal as Attorney-in-Fact by authority of the Board of Directors of said
corporation and by authority of this office under the Standing Resolutions thereof.

My commission expires _____________________                             _____________________________________________
                                                                                           Notary Public
COMPLIANCE LETTER

DATE: __________________________

Town Of Islip
Department of Environmental Control
401 Main Street
Islip, New York 11751

Re: 2019 Solid Waste Services Permit

This is to certify that all services provided in the Town of Islip will be in accordance with the ordinances of Chapter 21, which includes but is not limited to:

INITIAL NEXT TO EACH STATEMENT

______ ALL PERMITTED VEHICLES WILL BE LABELED WITH COMPANY NAME & TELEPHONE NUMBER IN LETTERS AT LEAST SIX (6) INCHES HIGH.

______ ALL CONTAINERS PROVIDED TO CUSTOMERS WILL BE LABELED WITH COMPANY NAME & TELEPHONE NUMBER.

______ ALL CONTAINERS PROVIDED TO CUSTOMERS WILL HAVE TOWN-ISSUED CONTAINER PERMIT STICKER AFFIXED TO THE FRONT RIGHT SIDE PRIOR TO PLACEMENT.

______ ALL CONTAINERS PROVIDED TO CUSTOMERS WILL BE PLACED ONLY ON PRIVATE PROPERTY. NO CONTAINERS WILL BE PLACED ON PUBLIC ROADWAYS OR SIDEWALKS.

______ ACCESS TO APPLICANT’S YARD AND/OR OFFICES WITHIN THE TOWN OF ISLIP WILL BE GRANTED TO ANY EMPLOYEE OF ISLIP DEC DURING OPERATING HOURS.

(Sign) ____________________________________

(Print Name) ______________________________

(Title) ____________________________________

NOTARY
SAMPLE

FEE RESPONSIBILITY LETTER

This letter should be submitted when an applicant is permitting trucks registered in a name other than that of the Company Applicant.

Letter should be on Company letterhead, signed and notarized.

Date

Town of Islip
Department of Environmental Control
401 Main Street
Islip, New York 11751

RE: 2019 Solid Waste Services Permit

This is to certify that ________ (your company name) ________ will be responsible for all tipping fees incurred by the following trucks registered to ________ (truck registrant's name) ________:

Year and Make of Truck License Plate No.

Your Signature
Name
Title

NOTARIZED
SAMPLE

CUSTOMER LIST COVER LETTER

TO BE PROVIDED BY COMMERCIAL CARTERS ONLY

Letter should be on Company letterhead, signed and notarized.

Date

Town of Islip
Department of Environmental Control
401 Main Street
Islip, New York 11751

RE: 2019 Solid Waste Services Permit

This is to certify that to the best of my knowledge, the customer list submitted in electronic format, represents the customers that we service within the Town of Islip.

Your Signature
Name
Title

NOTARIZED
**COMPANY NAME:** __________________________________________

**FORM COMPLETED BY:** __________________________________ PHONE NUMBER: _____________________

(Please Print Name)

**2019 CUSTOMER LIST – TOWN OF ISLIP**

<table>
<thead>
<tr>
<th>Customer Name</th>
<th>Street Address</th>
<th>Town</th>
<th>Zip</th>
<th>Size &amp; Type</th>
<th>Frequency Of Pick-up</th>
<th># of Units if Condo, Trailer, Apt., etc</th>
<th>Separate Collection Recyclables Y/N</th>
<th>Total Yards Collected</th>
<th>Total Tons Collected</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tom Jones Deli</td>
<td>234 Main St</td>
<td>Islip</td>
<td>11751</td>
<td>5 – 20 yds</td>
<td>1 x wk</td>
<td>N</td>
<td></td>
<td>433</td>
<td>43.3</td>
</tr>
<tr>
<td>JFK Kennedy Sch</td>
<td>34 Timber Road</td>
<td>East Islip</td>
<td>11730</td>
<td>2-30 comp</td>
<td>EOW</td>
<td>Y</td>
<td></td>
<td>60</td>
<td>18</td>
</tr>
<tr>
<td>Bay View Apts</td>
<td>1645 Burn Ave</td>
<td>Bay Shore</td>
<td>11706</td>
<td>cans</td>
<td>2 x wk</td>
<td>31</td>
<td>N</td>
<td>43</td>
<td>4</td>
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</tbody>
</table>

**SAMPLE CUSTOMER LIST**

TOTAL ANNUAL VOLUME & TONNAGE

**CUSTOMER LIST MUST PROVIDE TOTAL VOLUME AND TONNAGE**

(Nota: Disclose the requested information for all locations at which you provide service, whether through direct agreement with the owner/occupant, or via a subcontract with a parent organization, broker, or other entity.)

Give actual address, not billing address.

Conversion:
- Regular container - yards times 200 lbs - divided by 2,000 for tons.
- Compactor container - yards times 600 lbs - divided by 2,000 for tons.
- On Call = 1.5 times per month
- Condo Units/Town Houses, Trailer Parks – cans = 1.8 tons/year per unit
PLEASE KEEP COPIES OF THIS FORM

2019 VEHICLE LIST MODIFICATION FORM

USE TO ADD OR DELETE TRUCKS FROM YOUR PERMIT THROUGHOUT THE YEAR

DATE SUBMITTED: ________________________________

NAME OF COMPANY: ______________________________________________________ CLIENT #: ______________

TELEPHONE NUMBER: ______________________________________________________

LIST VEHICLES TO BE ADDED

<table>
<thead>
<tr>
<th>Year</th>
<th>Body Type</th>
<th>Make &amp; Model</th>
<th>License Plate #</th>
<th>Vehicle I.D. #</th>
<th>2017 ISLIP DECAL #</th>
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VEHICLES TO BE REMOVED

<table>
<thead>
<tr>
<th>Year</th>
<th>Body Type</th>
<th>Make &amp; Model</th>
<th>License Plate #</th>
<th>Vehicle I.D. #</th>
<th>2017 ISLIP DECAL #</th>
</tr>
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FEES:
ADD’L. TRUCKS – (number of additional trucks) _______ @ $250 each $__________

FEE ATTACHED $__________

THERE IS NO CHARGE TO REMOVE OR SUBSTITUTE A VEHICLE

_________________________________________ ______________________________
Signature Date

You must provide a current registration and insurance card for each truck addition or change. A new responsibility letter for tip fees, on Company letterhead signed and notarized, must also be submitted if added trucks are registered in a name other than permitted company.