

# City of Haverhill - Trash Cart Request Form

APPLICANT INFORMATION: \_\_\_\_\_  
First Name Last Name

APPLICANT PHONE #: \_\_\_\_\_  
Phone Number

DELIVERY ADDRESS \_\_\_\_\_  
# Street Unit

OWNER OF RECORD (  ): \_\_\_\_\_  
(Check if same as above) First Name Last Name

HOMEOWNER'S ADDRESS \_\_\_\_\_  
# Street City State ZIP

## **CART REQUEST: (Check ONE Box Below)**

New Construction or previously vacant property - No Charge for Initial Cart

**RENTAL** - Request for additional 64 Gallon Trash Cart(s).

Year 1 = \$150 (\$50 for cart and \$100 for extra trash disposal).  
Year 2+ = \$100 per year for extra disposal service.

**RENTAL** - Request for additional 32 Gallon Trash Cart(s) beyond 64 gallon capacity.

Year 1 = \$115 (\$40 for cart and \$75 for extra trash disposal).  
Year 2+ = \$75 per year for extra disposal service.

Quantity Requested: \_\_\_\_\_

## **CART SWAP:**

I would like to SWAP my 64 gallon cart for one (1) 32 gallon cart.

## **ADDITIONAL INFORMATION:**

\_\_\_\_\_  
\_\_\_\_\_

APPLICANT SIGNATURE:

DATE:

\*By signing this form I hereby certify that I am the owner of the above property and/or assume responsibility for requested cart(s) upon delivery.

Please fill out and return to: Solid Waste and Recycling Department - 500 Primrose St. Haverhill, MA 01830  
or E-mail a copy to [ksavvas@cityofhaverhill.com](mailto:ksavvas@cityofhaverhill.com)

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DEPARTMENT APPROVAL: