

**COOKE TOWNSHIP , CUMBERLAND COUNTY
WASTE COLLECTION SERVICE REGISTRATION FORM**

NAME:

ADDRESS: TRASH PICKUP:

ADDRESS: BILLING:

TELEPHONE NUMBER / E-MAIL

I AM CURRENTLY A CUSTOMER OF INTERSTATE WASTE SERVICES YES NO

(Please circle yes or no)

PLEASE PLACE AN X ON THE APPROPRIATE LINE TO INDICATE THE LEVEL OF SERVICE REQUESTED

Quarterly rates are as follows:

FULL SERVICE – WITH TOTE WITH TRASH CONTAINERS WITH THREE (3) 33 GALLON BAGS	_____	_____	\$48.90
SENIOR CITIZEN (65)– WITH TOTE WITH TRASH CONTAINERS WITH THREE (3) 33 GALLON BAGS	_____	_____	\$46.74
INDIVIDUAL BAGS (Minimum of 12 bags must be purchased per year)			\$3.50 EACH (12 bags, \$42.00)

EXEMPTION REQUESTED: _____ FILL IN REASON BELOW:

REASON FOR EXEMPTION REQUEST

____ SHARING A TOTE WITH ANOTHER HOUSEHOLD. PLEASE LIST THE HOUSEHOLD (NAME & ADDRESS) RECEIVING THE TRASH BILL AND TRASH PICKUP LOCATION:

____ TRANSPORTING TRASH TO ANOTHER LOCATION OUTSIDE THE TOWNSHIP FOR PICKUP. PLEASE STATE THE LOCATION OF PICKUP.

____ OTHER. PLEASE EXPLAIN WITH SPECIFICS: _____
