

**CITY OF PERRYSBURG DEPARTMENT OF PUBLIC SERVICE**

11980 Roachton Road | Perrysburg, OH 43551 | Office 419 872 8020 | [www.ci.perrysburg.oh.us](http://www.ci.perrysburg.oh.us)

**REFUSE HAULER LICENSE**

**In accordance with Codified Ordinance in Section 1086.05 (c)**

Name of Hauler \_\_\_\_\_ Phone Number \_\_\_\_\_

Address of Hauler \_\_\_\_\_

Vehicle Description (make, model, year)	License Plate Number
1 _____	_____
2 _____	_____
3 _____	_____
4 _____	_____
5 _____	_____
6 _____	_____
7 _____	_____
8 _____	_____
9 _____	_____
10 _____	_____
11 _____	_____
12 _____	_____

IN CONSIDERATION of the granting of this license, I or we agree to save the City of Perrysburg harmless from any and all damages whatsoever: and I or we do hereby covenant and agree to comply with the laws of the State of Ohio and the Ordinances of the City of Perrysburg, and that all statements made herein are true and correct. **ALL LICENSES EXPIRE ON DECEMBER 31<sup>ST</sup> OF THE YEAR OF ISSUE**

\_\_\_\_\_  
Applicant's signature Printed Name  
\_\_\_\_\_  
Title Date

**CITY USE ONLY**

License Fee Amount \_\_\_\_\_ License Numbe \_\_\_\_\_ Date Issued \_\_\_\_\_  
Approved \_\_\_\_\_, Director of Public Service