

City of Ringgold

150 Tennessee Street Ringgold, GA 30736

Office (706) 935-3061 Fax (706) 965-7446

REQUEST FOR <u>EXTRA</u> GARBAGE CAN RESIDENTIAL

DATE:	<u></u>	
NAME OF APPLICANT:		
LOCATION ADDRESS:		
	METER #:	
W/O #:		
CAN #:		
DELIVERED ON:		
LUNDERSTAND THAT THIS E	XTRA GARBAGE CAN IS THE PROPERTY OF	THI
CITY OF RINGGOLD AND A BEFORE THE EXTRA CAN SIGNING THIS DOCUMENT I	NON-REFUNDABLE \$60.00 FEE MUST BE F WILL BE DELIVERED TO THE RESIDENCE. ACKNOWLEDGE THAT A RECURRING \$10.00 LL BE ADDED TO MY WATER BILL EACH MONT	PAII B` FEI
SIGNATURE OF APPLICANT	DATE	
SIGNATURE OF CITY REPRESENTAT	IVE AMOUNT PAID	