ACCOMACK COUNTY PUBLIC WORKS
Post Office Box 52
Tasley, Virginia 23441

ONE TIME

PERMIT FEE

CHARGE ACCOUNT APPLICATION FORM
Accomack County Landfill

1. _____ _____
Company Name Telephone Number

_____ _____
Street Address Post Office Box

_____
City State Zip Code

2. Type of waste to be disposed: _____
3. Estimated tonnage to be disposed PER MONTH: _____ Ton(s)
4. Vehicles to be used:

YEAR	MAKE	TYPE (MODEL)	TAG NO.	ST.	VIN

6. Bonding – check bonding method:
_____ (a) $5000 Surety Bond (To be supplied from insurance company)
_____ (b) Security Deposit $_____ (Equivalent to 2 months' estimated tonnage)
amount

***** ACCOUNTS ARE BILLED MONTHLY AND BALANCES ARE DUE IN FULL UPON RECEIPT ****

7. Billing Address: _____
_____
_____
Telephone number: ( ) _____

8. Principal authorized to sign: _____
Name (print or type):_____
Title:_____

Signature: _____ Date:_____

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FOR ACCOMACK COUNTY USE ONLY

APPROVED DISAPPROVED BY:_____

ACCOUNT NUMBER:_____ EFFECTIVE DATE:_____