

For Fiscal Year 2014/2015

Please return this application to:
WASTE & RECYCLING DIVISION
SPECIAL ASSESSMENTS SECTION
10 Environmental Loop South
Winter Haven, Fl. 33880

For more information please call:
(863) 284-4319 or FAX (863) 284-4321

Application for (SWSA-HE)
for
Hardship Exemption for Waste & Recycling Collection Service

Name of Applicant _____
PLEASE PRINT CLEARLY

Mailing Address _____
CITY STATE ZIP CODE

Social Security Number _____ Telephone _____

Account Number (on Tax Bill) _____

List all occupants residing at this property _____

APPLICANT'S UNDERSTANDING

I understand that I am responsible for legally disposing of the domestic-solid waste generated on my property.
I also understand that I am responsible for notifying the Polk County Waste & Recycling Division
if I, the owner, vacate the property. This notification must occur immediately after vacating the property.

APPLICANT'S SIGNATURE

DATE

Please Complete the Affidavit located on the back of this Application.

