



APPLICATION FOR NON-EXCLUSIVE PRIVILEGE AGREEMENT

(Collection and Transportation of Municipal Solid Waste)

INSTRUCTIONS: Complete form and return to City of Fort Worth, Solid Waste Management Division
4100 Columbus Trail, Fort Worth, TX 76133

Trade Name of Applicant	Physical Address
Contact Name	Contact
Mailing Address	Telephone Number _____
	Fax Number _____

1. Briefly describe the nature and character of the service the applicant proposes to render.

2. Estimated Number of Vehicles Operating Under this Agreement. A list of all vehicles must be attached to this application. The list shall include make, model, year and license plate number of all vehicles to operate under this Agreement.

3. Do each of the vehicles listed in question 2 above have a current City of Fort Worth Hauling Permit?

4. Applicant has attached Certificated of Liability Insurance as required in the Non-Exclusive Privilege Agreement, section 13.	Circle One YES NO
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5. Signature of person authorized by the Company to sign this Application

Signature _____

Title _____ Date _____

For City Use Only

Privilege Agreement Number: _____ Date Approved: _____

Period Covered: _____ to _____ Approved M&C Number: _____