



# Metropolitan Nashville & Davidson County

Metro Waste Services - Business & Finance  
1600 2nd Ave N, Nashville, TN 37208 Phone: 615-862-5000

## Private Collection Permit Application

**DIRECTIONS:** All businesses that process or dispose of solid waste, recycling, construction & demolition waste or wood waste must complete Sections 1-3 and 7. All Sections 1-7 must additionally be completed for all businesses that collect and haul solid waste, recycling, construction & demolition waste or wood waste using a vehicle or mobile waste container.

### 1. Contact Information

Business Name: \_\_\_\_\_

Contact Person's Name: \_\_\_\_\_

Business Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

Tax ID Number: \_\_\_\_\_ Fax: \_\_\_\_\_

Permittee's Home Address: \_\_\_\_\_ Email: \_\_\_\_\_

### 2. Business Type (check all that apply):

Solid Waste Collection       Industrial Waste Collection       Construction/Demolition Collection

### 3. Insurance – attach proof of liability insurance (Haulers: \$ 1,000,000. Landfills, transfer stations and processing facilities: \$10,000,000)

### 4. Vehicle Permits Requesting (complete attached spreadsheet):

No. of Vehicles \_\_\_\_\_ X \$60/vehicle = \$ \_\_\_\_\_  
(Less than 3 cubic yards)

No. of Vehicles \_\_\_\_\_ X \$120/vehicle = \$ \_\_\_\_\_  
(Larger than 3 cubic yards): \_\_\_\_\_

### 5. Mobile Waste Container Permits Requesting (complete attached spreadsheet):

No. Mobile Waste Containers \_\_\_\_\_ X \$12/container = \$ \_\_\_\_\_  
(Larger than 2 CY): \_\_\_\_\_

### 6. Payment

**TOTAL ENCLOSED** \$ \_\_\_\_\_  
(attach payment to application): \_\_\_\_\_

### 7. Certification:

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete.

I also understand that it will be my responsibility to provide Waste Services a list of all vehicles by make, model, truck number, vehicle body type and license number for each vehicle permit requested and the size and location for each mobile waste container. If a mobile waste container is moved from the location specified in the application, it is my responsibility to inform Waste Services of the new location monthly. It is hereby fully agreed that any vehicles described in the attachments and operation of those vehicles will be in accordance with Metro Code 10-20-072.

\_\_\_\_\_  
**Print or Type Name**

\_\_\_\_\_  
**Title**

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**