

City of New Berlin
3805 S. Casper Dr.
New Berlin, WI 53151
Phone: (262) 786-8610
www.NewBerlin.org



Total License Fees Due: _____
Cash or check accepted only.

LICENSE APPLICATION TO COLLECT AND TRANSPORT GARBAGE, RUBBISH OR WASTE MATERIAL

Payment may be made by cash or check only. Please make all checks payable to: City of New Berlin

◆ **Application Type** – Please check all licenses applying for

To Serve: _____ Residential _____ Commercial _____ Both

Fees: \$75 – Annual License Fee (includes 1 vehicle)

\$25 – For each additional collection vehicle that operates in the City of New Berlin (Including motor scooters)

Number of Vehicles to be operated in New Berlin: _____ Total License Fee \$ _____

◆ **Applicant Information** – Please print legibly

Name of Company _____

Business Address of Company _____

Company Website _____

Type of Organization: Individual _____ Partnership _____ Corporation _____

List Here: Name, home and business address, email, home and business phones of individual applicant; or all partners; or all corporate officers and titles (Attach separate sheet if needed) _____

Complete Description of each vehicle to be used in the City of New Berlin (Attach Separate Sheet if Necessary) _____

Address of place where vehicles are stored when not in use: _____

Phone Number for Resident questions/comments _____

◆ **Applicant Consent and Signature** – Please read and sign

I, the undersigned, do hereby make an application to the Common Council of the City of New Berlin for a license to collect and transport garbage, rubbish or waste material in the City of New Berlin and have read and will follow City of New Berlin Ordinances. Licenses may be suspended and revoked for violations of this article or other applicable laws or ordinances after a public hearing by the City Council with at least 10 days' written notice thereof being given the licensee. I certify that all of the information provided on this application is true and correct to the best of my knowledge.

Signature _____ **Date** _____

OFFICE USE ONLY: Date Application Received: _____ Council Date: _____ License Sticker No(s). Issued _____ inclusive