Town of East Haddam – Department of Public Works



Public Works Garage Mailing: 7 Hood Lane POB 385

East Haddam, CT 06423 Moodus, CT 06469

Office: 860-873-5023 Fax: 860-873-6014

Waste Hauler License Application for Refuse Collection/Conveyance Due by June 30, 2023

 $License\ will\ be\ valid\ for\ 2023-24\ Fiscal\ Year\ (July\ 1,\ 2023-June\ 30,\ 2024)$

FEE: \$500.00

This form must be completed by any business transporting any type of waste material in the Town of East Haddam. This includes trash, recyclables, paper for shredding, bulk waste, yard debris, and any other solid waste material.

Return this completed form with \$500.00 Check Payable to the Town of East Haddam to:

Email Form: publicworks@easthaddam.org

East Haddam Public Works

Att: Transfer Station Haulers License

POB 385

Moodus, CT 06469

Company Name:	
Owner (s) Full Name:	
Address:	
Phone:	
Email:	
Contact Person:	
Customer Type:	
Waste Types & Receiving Facilities (Check All that Apply) □ MSW □	
Recyclables □ Demolition & Construction □ General Junk Removal □ Yard	
Waste □ Food Scraps □ Other (Specify)	
Do you collect from Residential Property: □ Yes □ No	
Do you collect from Commercial Property: □ Yes □ No	
As required by state law, the company must report to each municipality with	
which it is registered: (a) the types of solid waste, including recyclables,	
generated within each municipality, and collected by the company, (b) the	
name, location and contact information for the first destination where such	
solid waste, including recyclables, was delivered by the collector during the	
previous fiscal year, (c) the types and actual or estimated amounts of such	
solid waste, including recyclables, directly delivered to an out-of-state	
destination or to an end user or manufacturer in the state, and (d) such	
additional information as the commissioner of the Department of Energy and	
Environmental Protection deems necessary. The company further agrees that	
such reports shall be submitted annually, on or before July 31st, for solid	
waste collected during the prior fiscal year, on a form prescribed by the	
Commissioner. Hauler agrees to submit Annual Solid Waste Reporting Form	
to the Town of East Haddam by July 31st \square Initial	

	Printed Name and Title
Date	Signature of Owner or Designated Representative
The undersigned hereby attests that all information is true an Station or other place designated by the Board of Selectmen of Haddam. I realize that this license may be revoked for violation	
Return completed form by July 31st by Email or Postal Mail: Publicworks@easthaddam.org East Haddam Public Works Att: Transfer Station Haulers POB 385 Moodus, CT 06469	
All collectors are required to complete the Connecticut Solid Wathe following address by <u>July 31, 2024</u> . https://portal.ct.gov/-/media/DEEP/reduce reuse recycle/forms/COLLECTORMunications/	aste Collector Annual Solid Waste Reporting Form and return it to cipalAnnualReportFormpdf.pdf
A Certificate of Insurance for liability coverage for above name	d vehicles is enclosed with this application.
The registration issued under this application shall be for the per	riod beginning July 1, 2023, and ending June 30, 2024.
The applicant collector does hereby agree to conduct its operation regulations as set forth by the Town of East Haddam, the State of	
	eration of the Solid Waste Facility," the above-named Company um, the following vehicles will be used for collection/transportation in
Town of East Haddam R	efuse Collection/Conveyance
2	
List all Disposal Facilities your company delivers 1	waste to (Attach an additional page if necessary):
5	
3	
2	
	de all municipalities in Connecticut and all municipalities
As required by state law please list all municipalities	es in which the company collects MSW, recycling, C&D,

Vehicles Operating in the Town of East Haddam

Truck Make:
Truck Body Type:
CT Reg No.:
Truck Capacity:
C.Y. Tare Weight:
Gross Weight:
Truck Make:
Truck Body Type:
CT Reg No.:
Truck Capacity:
C.Y. Tare Weight:
Gross Weight:
Truck Make:
Truck Body Type:
CT Reg No.:
Truck Capacity:
C.Y. Tare Weight:
Gross Weight:
Truck Make:
Truck Body Type:
CT Reg No.:
Truck Capacity:
C.Y. Tare Weight:
Gross Weight:
Truck Make:
Truck Body Type: CT Reg No.:
Truck Capacity:
C.Y. Tare Weight:
Gross Weight:

□ Approved		
□ Denied		
□ Payment Received □ Che	eck # □ Credit Card	
License Number Assigned:	Date:	
Copy of Insurance Certificate Received: ☐ Yes ☐ No		

OFFICE USE ONLY: