

## Beltrami County Solid Waste 751 Industrial Park Dr SE Bemidji, MN 56601 218-333-8105

## Commercial Solid Waste Registration Form

| Name of Business  | <del></del>                 |                                     |                               |
|---|-----------------------------|-------------------------------------|-------------------------------|
| Address   |                             |                                     |                               |
| City  | State                       | Zip Code                            |                               |
| Owner / Contact of Business                                 |                             |                                     |                               |
| Telephone   | Fax                         | <u> </u>                            |                               |
| Billing Address Name  |                             |                                     |                               |
| Address   |                             |                                     |                               |
| City  | State                       | Zip Code                            |                               |
| Telephone   | Fax                         | E-Mail                              | <del></del>                   |
| Property Tax Parcel Number                                  | er                          |                                     |                               |
| Do You Own Property Busine<br>If No, Please Indicate Proper |                             | □ No                                |                               |
| Name  |                             | _                                   |                               |
| Address   | ····                        |                                     |                               |
| City  | State                       | Zip Code                            |                               |
| Telephone   | Fax                         |                                     |                               |
| Solid Waste Hauler Name                                     |                             |                                     |                               |
| If This Business Is Already R                               | egistered Please Include Ac | count Number                        |                               |
| This information must be as o                               | complete and accurate as po | ossible. Please mail to the address | above or give to your hauler. |
| Signed  |                             | Title                               |                               |
| Reltrami County Assigned Ac                                 | count Number                | Date                                |                               |