



Application No. \_\_\_\_\_

# YARD WASTE BIN ORDER FORM

Return this form to:  
City of Polk City  
Attn: City Clerk  
112 S. 3<sup>rd</sup> Street  
Polk City, Iowa 50226

Delivery Information: Yard waste Bins can be delivered free of charge.

Name: \_\_\_\_\_ Daytime Phone: \_\_\_\_\_

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

Email Address: \_\_\_\_\_

## 95 Gallon Yard Waste Bin

Number of Bins:   (1)  

Annual collection fee: \$100.

Amount submitted: \$ \_\_\_\_\_

Cash      Check No. \_\_\_\_\_      Visa/MC

### *Internal Use Only:*

Yard Waste Bin Number: \_\_\_\_\_

Yard Waste Sticker Number(s): \_\_\_\_\_

Delivery Date: \_\_\_\_\_

Delivered by: \_\_\_\_\_

Amount submitted for damaged, lost or unreturned bin. \$ \_\_\_\_\_

(\$60.00 per bin)

Cash      Check No. \_\_\_\_\_

**For additional information,  
please contact the City  
at (515) 984-6233**

**I understand the Yard Waste Bin is the property of the City of Polk City, and is on loan to me for the disposal of yard waste only. I agree that I will use the yard waste bin for its intended use, and agree that should the bin become damaged, lost or stolen, or if I do not return the bin; I will reimburse the City \$60.00 for the yard waste bin.**

Date \_\_\_\_\_ Signature of resident \_\_\_\_\_