



CITY OF INDUSTRY

RECYCLING CONTAINER DECAL (Form 102)

(1) Collector Information:

Collector/Recycler: _____ Salvage ID# _____

Primary Contact: _____ Phone _____

(2) Generator Information:

Generator: _____ Contact _____

Site Address: _____ Phone _____

Type of Container: Roll Off Box Small Bin Basket

Container Size: _____ (yards) Number of Containers: _____

Commodity: _____

**** Please complete a form for each generator and each commodity ****

(3) Decal Fees:

Number of Decals to be placed onsite: _____

Number of **extra** Decals for swapping/yard: _____

Total Decal Quantity ordered: _____ X \$10.00 per = \$ _____

(4) Mail the ORIGINAL and make your check payable to: City of Industry

Mail Check and ORIGINAL to:
City of Industry
Recycling Permit Program
P.O Box 3366
City of Industry, CA 91744-0366

Email or Fax a COPY to:
MuniEnvironmental, LLC.
Email: trieu@munienvironmental.com
Fax #: (866) 963-0137

Each Bin shall bear upon at least two of its sides the name and telephone number of the collector, which name and telephone number shall be in legible letters and numerals. Any such bin that does not comply with the requirements of this section shall be subject to removal as provided in Section 8.20 of Ordinance 686.

Bin Decals shall be adhered to the bin, cart or vessel, near the company name and telephone number.

For City Use Only:

Date Received: _____ Check # _____ Date Decals Mailed _____ By: _____