

**OFFICE OF THE CITY CLERK**

**LICENSE APPLICATION**

**TYPE:** GARBAGE REMOVAL LICENSE

**YEAR:** 20\_\_

**FEES:** \$100

**DUE:** January 1, 20\_\_

Late fee assessed after January 31 \$50

Late fee assessed after February 28 \$100

*The business listed below does hereby apply for a license in the City of Oneida for the purpose of obtaining a Garbage Removal License pursuant to Section 147-9 of the Oneida City Code.*

**BUSINESS NAME:** \_\_\_\_\_

**OWNER/APPLICANT:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**PHONE NUMBER:** \_\_\_\_\_

**SALES TAX ID #:** \_\_\_\_\_

**APPLICANT SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

*Photo ID (Driver's License/Non-Driver Photo Id, etc.) required for Owner/Applicant*

**FOR OFFICE USE ONLY**

I HEREBY APPROVE THE ABOVE APPLICANT FOR A CITY LICENSE

\_\_\_\_\_  
**CITY CLERK/DEPUTY**

\_\_\_\_\_  
**POLICE CHIEF**

**LICENSE #:** \_\_\_\_\_

**EXPIRES:** December 31, 20\_\_