



**Environmental Services**  
 222 Laporte Ave  
 PO Box 580  
 Fort Collins, CO 80522  
**970-221-6600**  
 fcgov.com

**SOLID WASTE COLLECTOR LICENSE APPLICATION**

Please return the following items **by November 30<sup>th</sup>** for the coming year's license:

- This application
  - If your company does not provide residential service, complete pages 1-2
  - If your company provides residential curbside service, complete full application
- Payment for license fee, as calculated below

Valid certificate of insurance\*

*Note: you must be up to date on your tonnage reporting forms (through June of this year) to receive a license*

Company Name:	Phone:
Contact Name:	Email:
Business Address:	Website:
Mailing Address (if different):	

I prefer to receive licensing and tonnage reporting information via  email  paper mail

**List all vehicles used directly in the collection of solid waste and/or recyclables and/or compostables.**

Colorado License Plate #	Vehicle Year/Make/Color/Gross Vehicle Weight	Cubic Yard Capacity	Empty Tare Weight	CO Dept. of Transportation Commercial Vehicle ID #

Please list additional vehicles on separate pages and attach to this form.

*For City use: account# 1000-421060*

**Total number of vehicles \_\_\_\_\_ x \$100 each = amount due: \_\_\_\_\_**

*\* Insurance requirement: Proof that the collector has obtained a general comprehensive liability/automobile insurance policy protecting the collector from all claims for damage to property or for bodily injury, including death, which may arise from operations under or in connection with this license and providing limits of coverage of not less than \$500,000 for bodily injury and property damage per occurrence or in the aggregate*

<b>SERVICE INFORMATION</b>	
1) Indicate any special trash/recycling services you provide to residential customers.	Yard trimmings collection Bulky item collection Neighborhood cleanup events Electronics recycling Other _____
2) Do you provide recycling to multi-family customers? <i>(a location is multi-family if its trash / recycling is collected in shared containers / dumpsters)</i>	No Yes (describe the type of recycling containers provided)
3) Do you provide recycling services to commercial customers?	No Yes (describe types of containers provided)
4) Do you provide recycling services to construction or demolition sites / projects?	No Yes (describe types of containers provided)
4) Do you provide recycling drop-off sites or containers for public use?	No Yes (please describe specific locations)
5) In the past year, did you make any changes to your business or communication with customers to increase recycling or reduce trash collected?	No Yes (please describe)
5a) Do you plan to make any such changes in the coming year?	No Yes (please describe)

*Any changes made to this information during the year must be promptly reported in writing to the City.*

**Do you provide collection services to single-family residential homes?**

No **(Pages 1-2 are all that are required -- do not complete pages 3+.)**

Yes, for trash and recycling (Please continue to fill out the remaining pages of this form.)

Yes, for compostables (Please complete question 5 on page 4.)

Return completed application and insurance verification to: [cmitchell@fcgov.com](mailto:cmitchell@fcgov.com)  
*(these items may also be submitted with the license fee to this mailing address:)*

Make check out to City of Fort Collins and mail to:  
City of Fort Collins Environmental Services  
Attn: Caroline Mitchell  
PO Box 580  
Fort Collins CO 80522

***I certify that the information provided in this application is true and correct.***

\_\_\_\_\_  
Company Name – Please Print

\_\_\_\_\_  
Owner Name -- Please Print

\_\_\_\_\_  
Owner Signature

\_\_\_\_\_  
Date

**RESIDENTIAL OPEN SUBSCRIPTION TRASH AND RECYCLING COLLECTION SERVICE**

*(For single-family residential customers)*

**VARIABLE TRASH RATES FOR OPEN SUBSCRIPTION CUSTOMERS (NON-GROUP ACCOUNTS)**

<p>1) Complete this section for standard open subscription solid waste rates your company offers to residential customers.</p> <p>The section to report group account rates is included later in the form.</p>	<p>Customer can buy bags or tags; sold in quantities of _____</p> <p>Cost per bag or tag:</p> <p>If charged, flat rate applied to bag / tag customers <i>(not to exceed 75% of 32-gallon per week trash service)</i></p>	<p>\$ _____ /Bag \$ _____ /Tag</p> <p>\$ _____ flat rate</p>
<p>One 32-gallon container per week</p> <p>One 64-gallon container per week</p> <p>One 96-gallon container per week</p>	<p>\$ _____ /month</p> <p>\$ _____ / month</p> <p>\$ _____ / month</p>	
<p>If charged, amount of service surcharge anticipated to be applied to customer bills in the coming year <i>(cannot exceed 25% of the cost of the 32-gallon per week trash service)</i></p>	<p>\$ _____ /month</p>	
<p>Charge for additional trash set out Charged per _____ (unit i.e. 32 gallon trash bag)</p> <p>Note: container sizes may vary slightly from those listed, depending on manufacturer designs.</p>	<p>\$ _____</p>	
<p>2) Describe how extra charges for trash are tracked (above subscription levels).</p>		
<p>3) Describe system used to identify trucks as recycling trucks.</p>		

Company name: \_\_\_\_\_

**City of Fort Collins Hauler License Application**

**CUSTOMER NOTIFICATION / EDUCATIONAL MATERIAL**

<p>Describe method of notification provided to customers.</p> <p>If customers receive all communications electronically, including annual service calendars, notification can be provided electronically. If customers receive <i>any</i> paper mail, <i>including annual service calendar</i>, notification must be sent via paper mail.</p> <p>Notification must be provided at a minimum upon initial service and at least once a year thereafter. Notification / educational document will be provided by the City of Fort Collins.</p>	<p>Method used to deliver notification to customers:</p> <p>Paper copy via the mail to all customers</p> <p>Paper copy to customers receiving paper mail, and electronic copy to customers receiving <b>only</b> electronic notifications, including annual service calendar</p> <p>Number of residential customers receiving <b>only</b> electronic notifications: _____</p>
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**CURBSIDE RECYCLING / ORGANICS COLLECTION PROGRAM**

1) Types of recycling containers your company provides to residential customers:	18 gallon 32 gallon 64 gallon 96 gallon Other. Container Description:	Customers pay a one-time recycling container deposit of \$ _____  No container deposit
2) Do you offer single-stream recycling to residential customers?	Yes No, other (please describe)	
3) Frequency of recycling service provided to customers:	Weekly Bi-weekly Varies depending on size of customer's recycling bin	
4) Conversion to cart service for recycling:	Number of customers during the past year that had an 18-gallon bin and have requested a recycling cart = _____	
5) Curbside yard trimmings and/or food scraps collection services provided to single family homes	Container size options offered to customers to collect yard trimmings: 64 gallon 96 gallon Other. Describe: _____	Rates charged for organics service: 64 gallon container \$ _____ / month 96 gallon container \$ _____ / month Other container \$ _____ / month
	Are food scraps collected in addition to yard trimmings? _____ Restrictions on food scraps:	Overages fee \$ _____ Per _____ Unit (i.e. 32-gallon trash bag)
	Curbside organics collection is provided by : Company submitting this form Sub-contracted to: (name of company) _____	

Company name: \_\_\_\_\_

<b>CURRENT NUMBER OF RESIDENTIAL CUSTOMERS AT EACH SERVICE LEVEL</b>			
<b>Level of Service</b>	<b>Open Subscription Accounts</b>	<b>Group Accounts (HOAs)</b>	<b>Total Number of Customers</b>
<b>Trash</b>			
Intermittent (bag/tag)			
One 32-gallon container / week			
One 64-gallon container / week			
One 96-gallon container / week			
Other: (please describe, e.g., Dumpster service)			
<b>Recycling</b>			
One 18-gallon container / week			
One 32-gallon container / week			
One 64-gallon container / week			
One 96-gallon container / week			
Other: (please describe)			
<b>Yard Trimmings / Organics</b>			
One 64-gallon container / week			
One 96-gallon container / week			
Other: (please describe)			

<b>RESIDENTIAL GROUP ACCOUNT TRASH AND RECYCLING COLLECTION SERVICE</b>				
<i>(For single-family residential customers)</i>				
<b>Name of HOA or special account:</b>				
Customer buys trash bags or tags; sold in quantities of _____	\$ _____ /Bag \$ _____ /Tag			
If charged, flat rate (not to exceed 35% of 32-gallon per week service) applied to bag/tag customers:	\$ _____	\$ _____	\$ _____	\$ _____
<b>MONTHLY RATES:</b>				
One 32-gallon container / week	\$ _____	\$ _____	\$ _____	\$ _____
One 64-gallon container / week	\$ _____	\$ _____	\$ _____	\$ _____
One 96-gallon container / week	\$ _____	\$ _____	\$ _____	\$ _____
Other: _____	\$ _____	\$ _____	\$ _____	\$ _____
Charge for additional trash set out Charged per _____ (unit i.e. 32-gallon trash bag)	\$ _____	\$ _____	\$ _____	\$ _____
Annual education distributed to residents by	Hauler HOA	Hauler HOA	Hauler HOA	Hauler HOA
If the rate schedules provided above to City are not publicly available and are maintained by Company as confidential, please check box.	Confidential	Confidential	Confidential	Confidential
<b>Name of HOA or special account:</b>				
Customer buys trash bags or tags; sold in quantities of _____	\$ _____ /Bag \$ _____ /Tag			
If charged, flat rate (not to exceed 35% of 32-gallon per week service) applied to bag/tag customers:	\$ _____	\$ _____	\$ _____	\$ _____
<b>MONTHLY RATES:</b>				
One 32-gallon container / week	\$ _____	\$ _____	\$ _____	\$ _____
One 64-gallon container / week	\$ _____	\$ _____	\$ _____	\$ _____
One 96-gallon container / week	\$ _____	\$ _____	\$ _____	\$ _____
Other: _____	\$ _____	\$ _____	\$ _____	\$ _____
Charge for additional trash set out Charged per _____ (unit i.e. 32-gallon trash bag)	\$ _____	\$ _____	\$ _____	\$ _____
Annual education distributed to residents by	Hauler HOA	Hauler HOA	Hauler HOA	Hauler HOA
If the rate schedules provided above to City are not publicly available and are maintained by Company as confidential, please check box.	Confidential	Confidential	Confidential	Confidential

**ALL RATE SCHEDULES MUST BE FILLED OUT COMPLETELY.** Please copy this page for additional reporting.