



STALLION SPRINGS COMMUNITY SERVICES DISTRICT

APPLICATION FOR THE SOLID WASTE SITE ACCESS TAG

Owner

Renter

Name: _____

Name: _____

Address: _____

Address: _____

Licence Plate #: _____

Licence Plate #: _____

Make: _____

Make: _____

Model: _____

Model: _____

Color: _____

Color: _____

Phone: _____

Phone: _____

Email: _____

Email: _____

By signing below, I agree to abide by the rules of the Stallion Springs Community Services-District Solid Waste Transfer Site and understand that I am subject to a fine by failing to do so; I understand that I will receive one access tag at no charge, good for a minimum of one year. Additional Tags have a fee of \$15.00 per tag. Additional tags will require a separate application, and will only be available to residents of Stallion Springs. I understand that it is my responsibility to notify the District office immediately should I move from the above residence.

Owner Sign Print Date

Renter Sign Print Date

Office Use Only

Tag # _____

Paid \$ _____

Extra Tag: _____