

**WYOMING COUNTY
PLANNING DEPT. – REFUSE SERVICE REQUEST**

Town: _____ Property Location: _____

Parcel ID: _____ Parcel (circle one): **Seasonal** or **Yearly**

Name & Mailing Address of all Property Owner(s): (please sign below)

_____ Phone #: _____

_____ Email: _____

Service Request (please circle one): **ADDITIONAL** **NEW** **REMOVAL**

Size of Tote Requested (please circle one): **64 gallon** **96 gallon**

Please note that tote size requested is **FINAL and cannot be altered once the totes have been delivered. Fee for garbage service remains the same regardless of tote size selected.*

Requirements:

- Please refer to attached Wyoming County Waste Management Collection Guidelines for eligibility.
- Person making collection request must be a current property owner
- Parcels located in the Towns of Arcade, Attica, and Java are not serviced by the Wyoming County Curbside Collection program

Owner Signature: _____ Date: _____

Owner Signature: _____ Date: _____

Return form to:

Wyoming County Planning Department
36 Center Street, Suite C
Warsaw, NY 14569

Phone Number: 585-786-5135
Fax Number: 585-786-6020
Email: jbragg@wyomingco.net

****Please allow up to 10 business days for processing****

For Office Use ONLY:

Assessor Approval: _____ Date: _____

Real Property Approval: _____ Date: _____

Planning Approval: _____ Date: _____