

**Building & Code
Enforcement**

www.junctioncity-ks.gov



PO Box 287
700 N Jefferson
Junction City, KS 66441
785-210-2951

TRASH HAULER LICENSE APPLICATION

Doing Business As:	
Applicant Name:	
Business Address:	
Business Mailing Address:	
Business Phone:	
Business Fax:	
Email:	
Method/Site of Disposal:	

Please submit the following with application:

- A list of each vehicle to be operated to include type, make, model and year
- Certificates of inspection for each vehicle from the Junction City Police Department (inspection must be within fifteen days of application)
- Proof of Insurance (General Liability, Automobile Liability)
- Payment

Failure to comply will result in the termination of your license.

Applicant's Signature

Date

Office Use Only:

Received by:	Date Received:
--------------	----------------