



City of St. Clair
 547 N. Carney Drive
 St. Clair MI 48079
 810-329-7121

Refuse Removal Registration Application

Please complete this form and return it to the City offices by:
 Mail - 547 N. Carney Drive, St. Clair MI 48079
 Fax - 810-329-7997

Date

Business Name

Business Address

Business Telephone

Applicant's Full Name

Driver's License Number

Relationship to Business

Home Office or Owner's Address

Phone at above location

Emergency Contacts 1 Phone

2 Phone

3 Phone

4 Phone

Number of Employees Full Time Part Time

Description of Vehicles:

Year/Make Capacity	VIN	State License Number

For Office Use Only

Fee Paid _____

Date Paid _____

Receipt Number _____

Approved by _____

Date _____

City Superintendent