



# TOWN OF HALIFAX COMMONWEALTH OF MASSACHUSETTS

## Board of Health

499 Plymouth Street, Halifax, MA 02338  
Telephone (781)293-6768 \* Fax (781)293-1738

### Rubbish Hauler's Permit Application

Company/Corporate Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Name of Responsible Person: \_\_\_\_\_

Mailing Address: (if different) \_\_\_\_\_

Cell Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Please be sure to send all required documents to be permitted in the town of Halifax, they are as follows:

- A completed, dated and signed permit application.
- A copy of Annual Tonnage Report.
- A copy of Liability Insurance Certificate.
  - This is a requirement for the Halifax Board of Health to issue a permit.
- A copy of Workers Compensation Insurance Certificate.
- A Workers Compensation Insurance Affidavit.
- Annual fee in the amount of \$200.00 made out to the Town of Halifax.

**\*\*Please return to:**

Town of Halifax  
Board of Health  
499 Plymouth Street  
Halifax, MA 02338

**Please read the statement below and sign:**

- I have received and read the current Halifax Private Hauler's Collection of Solid Waste and Recyclables Regulations Effective 06.05.17.
- I have read the Workers Compensation Insurance Affidavit statement and Liability Insurance statements above.

\_\_\_\_\_  
X Signature of Applicant:

\_\_\_\_\_  
Date: