

Dumpster Exemption Approval Number: _____

HOUSTON COUNTY SANITATION

462 NORTH OATES STREET
P. O. DRAWER 6406
DOTHAN, ALABAMA 36302

Telephone 334-677-4789
Fax 334-677-4780

REQUEST FOR SANITATION FEE DUMPSTER EXEMPTION

I hereby request a sanitation fee dumpster exemption. I hereby certify that I have on my premises a dumpster into which I am placing my garbage and other refuse and am therefore requesting an exemption from monthly sanitation collection fees. I certify that said materials are being disposed of in a manner qualified by the Houston County Solid Waste Officer – i.e., placed into a lawfully licensed and permitted solid waste land fill.

I understand that this dumpster exemption only applies to my residence, business and/or Mobile Home Park and does not qualify anyone else for a similar exemption. **Please list all the addresses your dumpster services on the back of this form; also please include a copy of your dumpster agreement and/or a copy of your dumpster invoice.**

Upon its approval, this dumpster exemption will cover the period of **01/01/2024** through **12/31/2024**. A Dumpster Exemption Request form has to be completed every year and approved by the Sanitation Manager for Houston County Alabama. It is the responsibility of the signee below to immediately notify the Houston County Sanitation Collections office at 334 677-4789 if the dumpster is removed from your premises.

Please note that falsification of records to a public agency in an effort to avoid sanitation fees qualifies as a class “C” felony subject to from one to nine years in the State Penitentiary.

Furthermore, I understand that if this exemption is not returned by December 15, 2023, I will personally be responsible for any charges that may accrue until such time as the exemption is provided to the office of Houston County Sanitation and I will be subject to the payment of any and all fees resulting from my failure to renew said exemption. In addition, I understand it is my obligation alone to renew this form on an annual basis or this exemption will no longer be in effect.

Exemption requested by: _____

Physical address of the dumpster: _____

Mailing Address: _____

Telephone#: _____ Date: _____

If the contact person is different than shown above please indicate the contact person’s name and contact information: _____

Approved by Houston County Sanitation Manager: _____

Date: _____

Address 1.

Address 2.

Address 3.

Address 4.

Address 5.

Address 6.

Address 7.

Address 8.

Address 9.

Address 10.

Address 11.

Address 12.

Address 13.

Address 14.

Address 15.

Address 16.

Address 17.

Address 18.

Address 19.

Address 20.
