

**2010 HOUSEHOLD HAZARDOUS WASTE
RESERVATION FORM**

Please Circle the date you plan to attend:

April 17

May 15

July 17

August 21

September 18

November 20

Preferred drop off time:

___ **morning(8-12)** ___ **afternoon(12-2)**

What type of waste do you plan to bring to the DEPOT?

Name _____

Address _____

City _____, NY

Zip _____

Telephone # _____

Vehicle Permit # _____

Email _____

(For notification purpose only)

Reduce & Reuse first then Recycle (273-4496)

(Fax 275-0000)

I certify that I am a resident of Tompkins County, New York, and that all of the waste listed, which I have brought to this collection program for proper disposal, is generated from a household in Tompkins County and not from any commercial or industrial source. If I have brought in used motor oil or antifreeze, I certify that it is also from a residential source and contains no contaminants, such as transmission fluid, gasoline, transformer oil, or any other solvents. I waive, release and forever discharge any and all rights and/or claims, and further agree to indemnify and hold harmless Tompkins County, its contractors, sub-contractors, staff volunteers, Board members, additional sponsors and contributors for any and all injuries and damages suffered by me that occur during or as a result of utilizing the HHWM DEPOT.

Signature

Today's Date

Remember you do need to have a Tompkins County Solid Waste Permit attached to your vehicle. You can obtain a permit by bringing in your vehicle registration and \$10.00 to the main office. The permit will be valid for three years.