



Department: Environmental Services Department

RE: Solid Waste Flood Debris Fee Reimbursement Form

Required Information – To be provided by Applicant (all fields must be completed in full)

Name: _____

Address of Impacted Property: _____

Mailing Address: _____

Contact Phone Number: _____

Landfill Ticket Information (Originals of All Scale Tickets/Receipts Must be Submitted with Form)

Disposal Location (facility): _____

	1	2	3	4	5	6
Scale Ticket Number						
Disposal Date						
Net Weight of Load						
Fee Charged						

Internal Use Only

Cheque Reimbursement Approved: Yes/No _____ (signature required)

Cheque Payable To: _____ (only one name)

Cheque Number: _____

Cheque Value: _____

Please use back of sheet for additional comments. Please allow for a minimum of 15 days for processing the Reimbursement claim.

MUNICIPALITIES: Ashcroft | Barriere | Cache Creek | Chase | Clearwater | Clinton
Kamloops | Logan Lake | Lytton | Merritt | Sun Peaks

ELECTORAL AREAS: "A" "B" "E" "I" "J" "L" "M" "N" "O" "P"