



Customer Application Package – No Credit

This application package contains the following:

- ✓ Customer Application
- ✓ Customer Vehicle Registration (CVR) Application
- ✓ Policy and Procedures Statement

FOR MONT. CO. USE ONLY
Date Received:
Customer #:
CVR#(s):
Entered by:
Approved by:

Directions:

The *Customer Application* must be completely filled out and all requested documents must be submitted to the Office of the Treasurer of Montgomery County for consideration. The person signing the application must initial all pages of the application package (*located in the lower left hand corner of each page*).

The original *Customer Application Package – No Credit* must be returned. The mailing address is Montgomery County Treasurer's Office Attn: Solid Waste PO Box 1500 Fonda, NY 12068.

Please read all related policies, procedures, and information located on our website at www.co.montgomery.ny.us. Hard copies of all related policies, procedures, and information are available upon request.

Failure to satisfactorily complete any part of the application, including initialing the bottom of each page, may result in processing delays.

Please note the Certification on page 2 must be notarized.

For this type of account, the only acceptable forms of payment at the scale house are cash or a check in the registered applicant's name.



Treasurer's Office

MONTGOMERY
C O U N T Y NY
Made of Something Stronger

Shawn J. Bowerman
County Treasurer

Customer Application Package – No Credit

Applicant/Business Name		Address (Street, City, State, Zip Code)	
Federal Identification #	Telephone #	Fax #	E-mail Address
Name of Contact Person		Type of Business	Years in Business

Certification

The undersigned certify the following:

1. I/We certify that all of the information contained in this application is true and complete. I/We made no misrepresentations in the application or other documents, nor did I/We omit any pertinent information.
2. I/We fully understand that under Penal Law Section 210.40, it is a crime, punishable as a class "E" felony under the laws of the State of New York, for a person to knowingly, with intent, in and by a written instrument as a false statement to mislead a public servant in the performance of his official function.
3. In the event of any dispute regarding this account, including but not limited to failure to pay, I/We agree to waive my/our rights to a trial by jury. I/We agree that a lawsuit may be commenced by certified mail, return receipt requested at the address listed on this application, and that a service of summons and/or complaint by such method shall constitute good and proper service of process, or any other lawful means. In the event that legal action is required, I/We agree that Montgomery County is entitled to collect all court costs and reasonable attorney's fees and expenses.
4. Montgomery County will not be responsible for lost or stolen Customer Vehicle Registration (CVR) cards. If a card is lost or stolen, please notify Montgomery County immediately for replacement cards.
5. By affixing my signature hereto, I hereby attest that I am the owner, a partner, or a responsible officer of the entity executing this application, and that I am authorized to execute such application; I am familiar with the Rules and Regulations of Montgomery County as they pertain to their Solid Waste Facilities.

Print Name of Authorized Officer

Authorized Signature

Notary

Title

Initial _____



MONTGOMERY
C O U N T Y NY
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Treasurer's Office

Shawn J. Bowerman
County Treasurer

Customer Vehicle Registration (CVR)

Customer Name: _____	FOR MONTGOMERY COUNTY USE ONLY
	Customer #: _____

For Montgomery County use: _____	License Plate #: _____	
Year: _____	Make: _____	Color: _____
Type of Vehicle: () Packer () Closed () Roll-Off () Pickup () Other _____		

For Montgomery County use: _____	License Plate #: _____	
Year: _____	Make: _____	Color: _____
Type of Vehicle: () Packer () Closed () Roll-Off () Pickup () Other _____		

For Montgomery County use: _____	License Plate #: _____	
Year: _____	Make: _____	Color: _____
Type of Vehicle: () Packer () Closed () Roll-Off () Pickup () Other _____		

For Montgomery County use: _____	License Plate #: _____	
Year: _____	Make: _____	Color: _____
Type of Vehicle: () Packer () Closed () Roll-Off () Pickup () Other _____		

Initial _____



Treasurer's Office

MONTGOMERY
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Shawn J. Bowerman
County Treasurer

Policy and Procedures Statement

I certify that I have read and understand the following policies, procedures, and information:
(Available on our website – www.co.montgomery.ny.us. Hard copies of all related policies, procedures, and information are available upon request.)

- ✓ **Returned Check Policy**
- ✓ **Procedure Manual**
- ✓ **Rate Schedule**

Print Name of Authorized Officer

Title

Authorized Signature

Date

Initial _____

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