

**PULASKI COUNTY REGIONAL SOLID WASTE MANAGEMENT DISTRICT  
SOLID WASTE HAULER LICENSING FORM**

**DATE:**

**BUSINESS NAME:**

**OWNER (If Different):**

**REGISTRANT:  
Name:**

**Business Telephone:**

**Physical Address:**

**Email:**

**Mailing Address: (if different)**

**Vehicle / Trailer Insurance Current**

Hauler License Number	Vehicle Make	Vehicle Model	Vehicle Year	Vehicle ID Number (VIN)	Vehicle License Number	Vehicle Size-Yards	Type of Solid Waste Hauled