

CITY OF HAYSVILLE
LICENSE APPLICATION FOR SOLID WASTE DISPOSAL AND COLLECTION

The undersigned herewith makes application to the City of Haysville, Kansas, for a Refuse Hauler's license for the period from May 1, _____ to April 30, _____, under the provisions of Ordinance No. 508, City Code Section 7-312 and herewith submits the following information:

Company Name: _____ Address: _____

Business Phone: _____ Owner's Name: _____

Owner's Home Address: _____ Owner's Home Phone: _____

In order to comply with the Haysville City Code, Section 7-306, I submit to the Governing Body proof that I have met the following requirements:

1. Evidence that vehicle(s) comply with codes.
2. Insurance
 - C. Workers Compensation and Employer's Liability

Workers Compensation -	Statutory amount
Employee's Liability -	\$100,000 each person

- D. Automobile Liability

The limits shall not be less than the following:

Bodily injury -	\$100,000 each person
Bodily injury -	\$300,000 each occurrence
Property damage -	\$50,000 each occurrence

- E. General Liability

Personal Injury -	\$100,000 each occurrence
	\$300,000 aggregate or single limit of \$300,000
Property Damage -	\$50,000 each occurrence
	\$100,000 aggregate

I understand that in the event I fail to comply with any provision of these ordinances or the City Code, the City Clerk may, upon fourteen (14) days written notice to me, revoke and cancel my license. I also understand that I may appeal such notice within ten (10) days to the Governing Body.

I, _____, the above named applicant, hereby agree to comply with all rules and regulations prescribed by the City of Haysville, Kansas, relating to solid waste disposal and collection and do hereby agree to immediate revocation of my solid waste disposal and collection license by proper officials for any violation of such laws, rules and regulations.

License fee of \$ _____ is enclosed herewith.

Signature of Applicant

AFFIRMATION ON OATH

I, _____, being first duly sworn, upon oath depose and say:
That I am the applicant who makes the above and foregoing application; that I have read and signed the same, know the contents thereof and that all statements herein contained are true.

Signature of Applicant

STATE OF KANSAS, COUNTY OF SEDGWICK, SS:

Subscribed and sworn to before me, a Notary Public in and for said county and state, this _____
day of _____, 20__.

NOTARY PUBLIC