Please Complete the following: (Please print clearly)

Name:

Number in household:

Street Address:

City/ Zip code:

Telephone:

Email:

**CCSWA Recycling Center Rules**

1. One pass per household.

2. Anyone caught allowing nonmember access to the recycling site(s) will have their pass revoked with no refund.

3. See list for materials accepted.

4. **NO PLASTIC BAGS.** Paper bags are fine.

5. Dumping non-recyclable garbage at the recycling location will cause membership to be revoked with no refund.

6. Lost passes will be replaced at a charge of $10.00

7. Gates will be active from 7:00 AM to 7:00 PM – 7 days a week.

I have read and understand the CCSWA Recycling Center Rules. I understand that I am responsible for my pass and that if I break any of the CCSWA Recycling Center Rules my pass may be revoked without a refund.

(Signature of pass owner) (Date)

***This box for office use only***

Key Fob ID#

**Mail completed applications with your check or money order for $75.00 to:**

**CCSWA Recycling Program**

**PO Box 729**

**Barboursville WV 25504**

***(make checks payable to: Cabell County Solid Waste Authority)***

***For questions regarding the recycling pass call: 304-412-3287*** ***Or email: Admin@ccswa.us***