

EDWARD McANDREW, P.E.
COMMISSIONER

MARK WITKOWSKI
DEPUTY COMMISSIONER



TEL. 845-807-0261

TEL. 845-807-0294

**COUNTY OF SULLIVAN
DEPARTMENT OF SOLID WASTE & RECYCLING**
91 LANDFILL DRIVE
MONTICELLO, NY 12701

Solid Waste Billing Manifest

DATE: _____

TIME: _____

ACCOUNT TO BE INVOICED: _____

APPROVED HAULING COMPANY: _____

This form is to authorize the above named hauling company to bring material to the Monticello Transfer Station for disposal and for the County to invoice said material to the account indicated on this form. Only ORIGINAL SIGNATURES are accepted, no photo copies please.

AUTHORIZING SIGNATURE: _____

PRINT NAME: _____

MATERIAL: _____

**Approval is at the discretion of the Department of Solid Waste & Recycling.