

MUNICIPALITY OF THE COUNTY OF VICTORIA WASTE MANAGEMENT ACCOUNT APPLICATION FORM

Mailing: P.O. Box 370, Baddeck, NS B0E 1B0 Civic: 495 Chebucto St., Baddeck, NS B0E 1B0 Phone: (902)295-2026 Email: kelly.brett@countyvictoria.ns.ca www.victoriacounty.com

Facility (please check facilities that will be used):	License Plate Number:
Baddeck Waste Management Facility	<mark> </mark>
Dingwall Transfer Station	
New Haven Recycling Depot	
Company Name:	
Mailing Address:	
Accounts Payable Contact Information:	
Name:	
Phone:	Email:
rnone.	Liliali.
Requested by (please print name):	Signature:
,	
Owner/Manager, Alternate Phone, and Email Address (please print):	
Name: Phone:	Email:
Decree of the forest the control of	
Payment Information:	Evein
Payment Information: Visa MC Card #	Expiry
Visa MC Card #	
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Visa MC Card # Sig Name on Card: Sig Payment is due 30 days after statement date. Interest	nature:
Visa MC Card # Sig	nature:
Visa MC Card # Sig Name on Card: Sig Payment is due 30 days after statement date. Interest	will be charged at 1.25% per month on all overdue
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