

Corporation of the Municipality of Brockton

Municipal Office 100 Scott Street, Box 68 Walkerton, ON NOG 2V0

Waste Management Fee Exemption Form

		Date:	
Roll#:	41-04		
Name:		Phone Number:	
Address	:		
Email: _			
Reason 1	for exemption:		
	understand and agree that the attached con I will contact the Municipal office.	tract is current and in effect. Should th	ere be any
Signatur	e:	_	
☐ Co	ppy of current contract attached		
For Offic	e Use:		
Signature	e:	_	
Date Pro	cessed:	Tr#:	

Telephone: (519) 881-2223 Fax: (519) 881-2991 Email: info@brockton.ca Website: www.brockton.ca