

**LIBERTY COUNTY SOLID WASTE ENTERPRISE FUND  
LIBERTY COUNTY BOARD OF COMMISSIONERS**

Liberty Courthouse Annex  
100 N Main St, Suite 1510  
Hinesville, Georgia 31313  
(912) 884-5353

**APPLICATION FOR REFUSE DISPOSAL SERVICE  
AT THE LIBERTY COUNTY TRANSFER STATION**

Applicants/Business Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City/State/Zip Code: \_\_\_\_\_

Daytime Phone Number: \_\_\_\_\_

**Conditions:**

1. The Liberty County Solid Waste Transfer Station accepts these types of refuse:  
Putrescible, Yard Waste, Construction Debris, White Goods (stoves, refrigerators, A/C units, etc.), and Furniture.  
Note: None of the Liberty County refuse disposal facilities can accept liquids (as defined by the Georgia Department of National Resources), contaminated soils, hazardous materials (including asbestos), medical waste, or dead animals.
2. Refuse delivered to the Liberty County Transfer Station will be unloaded at designated areas as directed by the facility operator. Improperly deposited refuse will be relocated by the applicant or by the county at cost (manpower and equipment plus \$50.00) to the applicant.
3. Applicant agrees to pay the posted disposal facility rate as established by the Liberty County Board of Commissioners. The disposal rate will be shown as a cost per ton or any portion thereof.
4. Payments are due by the 28<sup>th</sup> of each month and shall be payable to the Liberty County Solid Waste Authority at the above address.
5. Payments received after the 28<sup>th</sup> of the month will be assessed a late fee equal to ten (10) percent of the outstanding balance as of the due date of the payment.
6. If service payments (including any late charges) are not received within 30 days of the due date, the account will become past due.
7. Past due accounts will result in termination of this agreement and processing of the past due account by a debt service agency. Any applicant who causes termination of this agreement for failure to make payment will be required to post a predetermined, non-interest bearing deposit for future refuse disposal service with Liberty County.
8. Invoices for refuse disposal will be based upon scaled loads as recorded at the disposal facility and verified by the applicants' agent. Applicants are advised to establish an "agent identification system" known by the disposal facility operator to prevent the assessment of fraudulent service fees.

**Applicant has read, understands, and agrees to the terms stated above and to the provisions of the Liberty County Code of Ordinances, specifically Chapter 15, Solid Waste.**

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

Applicant's Name (Type/Print) \_\_\_\_\_

For Solid Waste Operations Manager Use Only:

Customer Account Number \_\_\_\_\_

**LIBERTY COUNTY SOLID WASTE AUTHORITY**

**TRANSFER STATION ACCOUNT INFORMATION**

**ACCOUNT NAME**

*List the name of the person or business who will be responsible for the account*

Name \_\_\_\_\_

If business, Employer Identification Number \_\_\_\_\_

If individual, Social Security Number \_\_\_\_\_

**MAILING ADDRESS**

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**CONTACT INFORMATION**

Name \_\_\_\_\_

Title \_\_\_\_\_

Telephone Number \_\_\_\_\_

Alternate Telephone Number \_\_\_\_\_

Fax Number \_\_\_\_\_

E-mail Address \_\_\_\_\_

**ADDITIONAL CONTACT INFORMATION**

*Please provide information on an additional contact for the account if possible*

Name \_\_\_\_\_

Telephone Number \_\_\_\_\_

E-mail Address \_\_\_\_\_