



City of West Orange
Ordinance 230-I
Mandatory Trash Service

Exemption Request

Property Owner's Name _____

Mailing Address _____

City _____ State _____ Zip _____

Driver's License # _____ DL State _____

Phone _____

Exemption being requested for this address:

Reason for exemption request:

For Office Use Only

Date Request Reviewed _____ Reviewed by _____

Request Approved

Request Denied

Notes: _____
