



Northern Recycling & Waste Services
 P.O. Box 2529
 Paradise, CA 95967
 530-876-3340 Fax: 530-877-3825

Northern Recycling & Waste Services is committed to the communities we serve. This commitment includes, when possible, assisting non-profit clubs, organizations and churches through our Community Contribution program. In order to streamline your request and ensure all community clubs/organizations an equal opportunity to this program we would like you to complete our Community Contribution Request Application.

Today's Date: _____ Date Services Needed: _____ to _____

Name of Organization: _____

Event Name: _____

Type of Service Requested: _____

Service Address / Location: _____ City: _____

Organization Mailing Address: _____

Phone Number: _____ Nonprofit Tax I.D.# (if applicable) _____

Contact: _____ Phone #: _____

Requested By: _____ Signature: _____

Please provide a short description of your organization and the purpose of your request:

This form must be completed and received at least four weeks prior to your service needed. Mail or fax to the company and address listed above. Due to the number of requests received only one application per year, per organization will be honored.

Please sketch a schematic of your event location and placement instructions for the services needed. If you need help with this please call our office at 530-876-3340.

Location Schematic.

For office use only.		
Date Received _____	Approved By _____	Date _____
Entered By _____	Date _____	Value _____