



# City of Williamsport

1500 West 3rd Street · Williamsport, PA 17701  
(570) 327-7500

Public Works

(570) 326-4684

## Commercial/Institutional Keycard Registration Form

Date: \_\_\_\_\_

| Contact Information      |                  |        |
|--------------------------|------------------|--------|
| First Name:              | Last Name:       |        |
| Address:                 |                  |        |
| City:                    | State:           | Zip:   |
| Phone:                   | Alternate Phone: | Email: |
| Drivers' License Number: |                  |        |

| Vehicle/Trailer Information                                      |                   |       |
|--|-------------------|-------|
| Max 10 vehicles/trailers, must be registered to a listed entity: |                   |       |
|  |                   |       |
| <b>VEHICLE/TRAILER 1</b>   |                   |       |
| Make:  | Model:            | Year: |
| Tag:   | Registered Owner: |       |
|  |                   |       |
| <b>VEHICLE/TRAILER 2</b>   |                   |       |
| Make:  | Model:            | Year: |
| Tag:   | Registered Owner: |       |
|  |                   |       |
| <b>VEHICLE/TRAILER 3</b>   |                   |       |
| Make:  | Model:            | Year: |
| Tag:   | Registered Owner: |       |

|                           |                   |       |
|---------------------------|-------------------|-------|
| <b>VEHICLE/TRAILER 4</b>  |                   |       |
| Make:                     | Model:            | Year: |
| Tag:                      | Registered Owner: |       |
| <b>VEHICLE/TRAILER 5</b>  |                   |       |
| Make:                     | Model:            | Year: |
| Tag:                      | Registered Owner: |       |
| <b>VEHICLE/TRAILER 6</b>  |                   |       |
| Make:                     | Model:            | Year: |
| Tag:                      | Registered Owner: |       |
| <b>VEHICLE/TRAILER 7</b>  |                   |       |
| Make:                     | Model:            | Year: |
| Tag:                      | Registered Owner: |       |
| <b>VEHICLE/TRAILER 8</b>  |                   |       |
| Make:                     | Model:            | Year: |
| Tag:                      | Registered Owner: |       |
| <b>VEHICLE/TRAILER 9</b>  |                   |       |
| Make:                     | Model:            | Year: |
| Tag:                      | Registered Owner: |       |
| <b>VEHICLE/TRAILER 10</b> |                   |       |
| Make:                     | Model:            | Year: |
| Tag:                      | Registered Owner: |       |

**Compliance Information**

I certify that I am the owner/tenant/responsible party of the above-listed property within the City of Williamsport, and I have read the attached rules and regulations and hereby agree to follow all rules and regulations pertaining to the City of Williamsport Brush/Mulch Recycling Collection Area and key card registration. I understand that violation of any of these rules and regulations will result in forfeiture of privileges to use the Brush/Mulch Recycling Collection Area and termination of key card access. I agree to make known to the household member (additional responsible party) listed, the terms and conditions for use of the Brush/Mulch Recycling Collection Area and key card access and agree to take responsibility for their actions while using my key card. Additionally, I acknowledge the above information is true and correct.

Applicant Signature:

**Official Use Only**

Approved by:

Keycard HID #:

**Public Works Administrator**

Fees Due: \$5.00 / \$10.00

Paid

Fees processed by: