

RESIDENTIAL HHW COLLECTION FORM

RUTLAND COUNTY SOLID WASTE DISTRICT

Employee Initials: _____ Customer Arrival Date & Time: _____

Customer Info: _____

Name Street Address Town State Zip

Material Description	Quantity/UOM	Cost
Material Description	Quantity/UOM	Cost
Material Description	Quantity/UOM	Cost
Material Description	Quantity/UOM	Cost
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Material Description	Quantity/UOM	Cost

Time Finished Sorting Customer Material: _____