

LANDSCAPER PERMIT PROGRAM OWNER AND AUTHORITY STATEMENT

(ALL SPACES MUST BE COMPLETED)

In compliance with Miami-Dade County Code (Code) Chapter 15, Section 15-17, I _____ state that I am the owner and duly authorized representative of _____, the name under which this permit is being applied for. I am fully responsible for the submission of this application and as such, have complete authority to validate this Landscaper Permit Statement.

As the owner and authority for this Landscaper Permit application, I understand and certify that I will comply with the following:

- A. The Landscaper Permit is for the applicant to engage in creating or maintaining landscaped areas, including tree trimming and tree removal.
- B. I am limited to the transport and disposal of clean yard trash only and understand that clean yard trash is defined as "yard trash free of other forms of solid waste" (e.g. garbage, trash and construction and demolition (C&D) debris).
- C. Excluded is land clearing, dirt, rock, lumber, wood, and any yard trash debris previously been used as part of a construction or demolition project or manufactured structure. Non-inert substances such as bamboo, timber, vegetation, packaging waste, and other organic materials used in C&D are prohibited from delivery using a Landscaper Permit.
- D. Landscaper Program Permitted vehicles are considered as commercial vehicles and as such are not allowed access to the Miami-Dade neighborhood Trash & Recycling Centers for "at no charge" disposal although owner/resident may have previously been allowed "at no charge" access in said vehicle as a Miami-Dade County Waste Service Customer prior to vehicle being registered under the Landscaper Permit Program.
- E. Equipment must be conspicuously and permanently marked on both sides of the automotive with the name of the hauler.
- F. Any change of the information provided in the application will be reported in writing to the Permit Section within thirty (30) days of change
- G. The insurance requirements in Section 13 of the application shall not be constructed as imposing on Miami-Dade County or the Department, or any official or employee of the County any liability or responsibility for injury to any person or property damaged by the permittee.
- H. Any misrepresentation of information provided in this application may cause revocation of the permit and denial of future permit applications.

The applicant will abide by all ordinances, rules and regulations stipulated in the Code and/or the Department.

Any misrepresentation of information provided in the application may result in denial of the permit application, revocation of the current permit and denial of future permit applications.

BY: _____
Signature of Owner

Date

Printed Name of Owner

*******DO NOT WRITE ON THIS PAGE*******
FOR OFFICIAL USE BY THE DEPARTMENT OF SOLID WASTE MANAGEMENT ONLY

LANDSCAPER PERMIT CHECKLIST

****EACH ITEM MUST BE VERIFIED BY PROCESSING STAFF ****

_____ Local Business Tax Receipt - Issuing County _____ Year _____
 _____ Current Vehicle/Trailer Registrations Renewed _____ New _____
 _____ County Contractor Yes _____ No _____ Auto Liability Insurance _____
 _____ Current Automobile Insurance Expires: _____
 _____ Owner and Authority Statement Completed _____
 _____ Fees: Check # _____ CC Type _____ MO# _____ CCA _____

THIS BECOMES AN OFFICIAL PERMIT WHEN SIGNED BELOW:

Permit Account Number: _____ Date Reviewed : _____

Permit Fee \$ _____ Minus Account Credit \$ (_____) **TOTAL Permit Fee Paid:\$** _____

Total TRC Decals Issued by Permit Section : _____ TRC# _____ : _____ ST # _____ : _____

Total LF Decals Issued by Permit Section: _____ LF# _____ : _____ LT# _____ : _____

Approved By: _____ Date Approved _____
 (Authorized Signature)

Sent to Enforcement _____ NEW VEHICLE DECAL(S) ISSUED BY ENFORCEMENT

-----/-----/----- Facility _____ Staff _____

Total TRC Decals Issued by Enforcement: _____ TRC # _____ : _____ ST # _____ : _____

Total LF Decals Issued by Enforcement: _____ LF# _____ : _____ LT# _____ : _____

 Permit Staff _____ **VEHICLE(S) ADDED DURING PROGRAM YEAR** Facility _____ WEO _____
 -----/-----/----- New Vehicle Added _____ Replacement _____

Permit Fee _____ Minus Account Credit \$ (_____) **Permit Fee Paid:\$** _____

Total TRC Decals Issued: _____ TRC # _____ ST # _____

Total LF Decals Issued: _____ LF# _____ LT# _____

 Permit Staff _____ **VEHICLE(S) ADDED DURING PROGRAM YEAR** Facility _____ WEO _____
 -----/-----/----- New Vehicle Added _____ Replacement _____

Permit Fees _____ Minus Account Credit \$ (_____) **Permit Fee Paid:\$** _____

Total TRC Decals Issued: _____ TRC # _____ ST # _____

Total LF Decals Issued: _____ LF# _____ LT# _____