

Special Account Creation Form

INSTRUCTIONS: Please print out this form, fill it out and sign it, and return along with any of the required documents listed below for proof of ownership. You may scan and return the form by email to dswm@miamidade.gov or postal mail to DSWM, Attn: Billing Unit, 2525 NW 62 St. 5th Floor, Miami, FL 33147. Please note the form must be filled out and signed by the property owner or authorized legal representative. It CANNOT be filled out by a tenant or employee.

REQUIRED: When submitting the form to the Department of Solid Waste Management, please include ONE (1) of the following forms of proof of ownership of the property to receive services:

Warranty Deed (all pages, to include signatures and notarization)

Closing or Settlement Statement (all pages, to include signatures)

Property Owner Name

Name of Agent for Property Owner *(if applicable)*

Property Address *(Please note we can only service properties within our service area; call 305-594-1630 for details)*

Folio Number *(miamidade.gov/pa/property_search.asp)*

Property Owner/Agent Contact Number

Mailing Address *(if different from property, otherwise leave blank)*

City

State

Zip Code

Contact Phone Number

Email

SERVICES REQUESTED *(Check all applicable — fees for all selected services will be direct billed)*

BULKY WASTE PICKUP
(\$25/cu. yd., call 305-514-6056 to request estimate)

ROLL-OFF CONTAINER SERVICE – 20, 30 or 40 yards
(Call 305-594-1630 for fees and details)

Owner/Agent Signature

Date

Billing Unit Use Only