



TOWN OF MILLIS

OFFICE OF THE BOARD OF HEALTH

900 Main Street #213 • Millis, MA 02054

Phone: 508-376-7042

Fax: 508-376-7053

APPLICATION FOR TRASH HAULER – FEE \$130.00

In accordance with Millis Board of Health Regulations, application for a
TRASH HAULER License is hereby made by:

Company Name: _____

Contact Person: _____ Cell # _____

Address: _____

Telephone No. _____ Email: _____

Truck Registration No(s). _____

The following Information is to be submitted to the Board of Health:

- List of Customers (attach sheet)
- Estimate of tons of solid waste collected daily _____
- Estimate of recyclables collected daily _____
- Town of Millis property owners must obtain a Certificate of Good Standing from the Treasurer's Office

Pursuant to the MGL Ch. 62C, sec. 49A, I certify under penalties that I, to my best knowledge and belief, have filed all state tax returns and paid all state taxes required by law.

Federal I.D. # or Social Security # _____

Applicant's Signature: _____ Date: _____