

# HERNANDO COUNTY

## APPLICATION FOR COMMERCIAL LICENSE

- |   |  |
|---|--|
| <input type="checkbox"/> Commercial                     | <input type="checkbox"/> New Application     |
| <input type="checkbox"/> Construction & Demolition Only | <input type="checkbox"/> Change of Ownership |
| <input type="checkbox"/> Residential                    | <input type="checkbox"/> Name Change         |

1. Name: \_\_\_\_\_
2. Address: \_\_\_\_\_
3. Federal Employer Identification Number: \_\_\_\_\_
4. Do you presently operate a residential franchise in Hernando County?      Yes     No
5. Do you presently hold a non-exclusive commercial franchise to provide commercial service in Hernando County?      Yes     No
6. If you are presently doing business in Hernando County, do you dispose of waste collected from locations outside of Hernando County at the Hernando County Northwest Waste Management facility?      Yes     No     N/A
7. If you are not presently doing business in Hernando County, do you plan to dispose of waste collected from locations outside of Hernando County at the Hernando County Northwest Waste Management Facility?      Yes     No     N/A
8. Where do you plan to dispose of refuse collected from locations in Hernando County?  
\_\_\_\_\_
9. Are you familiar with the Solid Waste Collection and Disposal Ordinance of Hernando County, Florida, and do you agree to abide by the terms of said Ordinance?    Yes     No
10. Attach a list of all equipment with a unit cost in excess of \$5,000 that you are now operating in Hernando County or have available for operation in Hernando County. If you are not presently doing business in Hernando County, attach a list of all equipment with a unit cost in excess of \$5,000 that you plan to have available to start you Hernando County operation. The listing should consist of the following minimum information:
  - a. Date acquired.
  - b. Model Year if a collection vehicle.
  - c. Make (if a collection vehicle), otherwise provide a description.
  - d. Original cost.
  - e. Condition.
  - f. Mileage.
  - g. License plate number.
  - h. Florida registration number.

11. Attach financial statements for your most recently completed fiscal year. The financial statements at a minimum should consist of a balance sheet and a statement of income. If the applicant is a newly formed company and historical financial statements are not available, attach a projected balance sheet, in lieu of the historical financial statements.

12. Attach a list which includes the following information for all officers, directors, stockholders, owners, and/or partners:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Federal Employer Identification number (corporation) \_\_\_\_\_

Annual compensation; this includes salary, director's fees, distributions to partners and/or personal withdrawals made by a sole proprietor.

Note: Companies registered to sell stock over the counter or upon a listed exchange are not required to provide the above requested information for stockholders.

13. Attach a list of all insurance policies presently in force, including life insurance policies for officers, directors, stockholders, owners, and/or partners. Show the coverage amounts.

14. Do you or will you maintain a business office in Hernando County?      Yes       No

15. Attach a copy of your capital expenditure plan. Be as specific as possible. As a minimum, for all equipment listed pursuant to item #10 above, provide the planned replacement date, estimated cost of replacement, and planned source of the money to be used to acquire the replacement.

16. Who should be contacted concerning this application and to arrange for a physical inspection of equipment?

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone #: \_\_\_\_\_

17. List Holidays observed by your company (those for which no collection will occur).

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

18. Provide a list of employees by name showing years with the company and position.

I hereby certify that the information provided in this application is, to the best of my knowledge, true and correct and accurately represents the standing of this firm. Additionally, I fully acknowledge and understand the Hernando County Waste Management Ordinance and Procedures.

\_\_\_\_\_  
Company Name

\_\_\_\_\_  
Authorized Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

Hernando County  
Board of County Commissioners

\_\_\_\_\_  
Authorized Signature

\_\_\_\_\_  
Date