The WasteAuthority.com

Monroe County Municipal Waste Management Authority

2026

Compost Facility Yearly Permit Application

COMMERCIAL

Business Name:_____

Street Address:_____

_____

Website:_____

Renewal Date:_____

First Name:_____

Phone:_____

Email:_____

Authorized Person

Last Name:_____

First Name:_____

Permit Fee $350.00 : (Permit #_____)

Vehicle #1

Make:_____Model:_____Year:_____License Plate #_____

Vehicle #2

Make:_____Model:_____Year:_____License Plate #_____

Vehicle #3

Make:_____Model:_____Year:_____License Plate #_____

Vehicle #4

Make:_____Model:_____Year:_____License Plate #_____

Vehicle #5

Make:_____Model:_____Year:_____Licence Plate #_____

With my signature below, I hereby certify that I agree to follow the Compost Facility rules and regulations.

Signature:_____ Date:_____

Do Not Write Below This Line

_____

Permit approved by:_____ Date:_____

Thank You! Renewal Date:_____

183 Commercial Blvd.
Blakeslee, PA 18610

www.TheWasteAuthority.com

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