2024 RESIDENTIAL WINDOW STICKER PROGRAM **APPLICATION (1 APPLICATION PER ADDRESS)**

Return Application to: Shoshone County Solid Waste 700 Bank Street, Ste 120 Wallace, ID 83873 Fax: (208) 783-5508

Email: transferstation@co.shoshone.id.us

	Date:			
Property Owner Name:				
Renter's Name: (if applicable) STICKERS WILL ONLY	BE ISSUED TO	THE PROPERTY O	OWNER OR MGMT CO.	
Please provide your current mailing addr	ess – where you w	ould like the stickers	s mailed to upon approval:	
(Mailing Address)	(City)	(State)	(Zip)	
Telephone Number: ()			<u></u>	
Shoshone County Residential Profile (If different from mailing)	coperty Addres	s:		
Street Address		City		
Requested Stickers: Up to 2 sticker purchased at a cost of \$5.00 each. St stickers have previously been issued,	tickers are issued	for the property,	not the person. If	
Number of Stickers Requested:	□ 1 (free)	□ 2 (free)	□ 3 □ 4	
Payment for Additional Stickers:				
Property Owner Signature:				
If you have questions, please contact the Department at (208) 784-5190	2 Administration o	ffice of the Shoshor	ne County Solid Waste	
	Office Use (Only		
Property AIN:		SW Fee Year:		
Sticker #1: Sticker #2: Sticker #3: Sticker #4:		Issued Date: Mailed Date:		