

**2025 RESIDENTIAL WINDOW STICKER PROGRAM
APPLICATION (1 APPLICATION PER ADDRESS)**

**Return Application to:
Shoshone County Solid Waste
52619 Silver Valley Rd
Kellogg Id 83837
Phone: (208) 784-5190
Email: transferstation@co.shoshone.id.us**

Date: _____

Property Owner Name: _____
(please print)

Renter's Name: _____
(if applicable) STICKERS WILL ONLY BE ISSUED TO THE PROPERTY OWNER OR MGMT CO.
Please provide you current mailing address:

(mailing address)	(city)	(state)	(zip)
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Telephone Number: (_____) _____ - _____

Shoshone County Residential Property Address:
(If different from mailing address)

Street address	City
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Requested Stickers: Up to 2 stickers provided for free: up to 2 additional stickers may be purchased at a cost of \$5.00 each. Stickers are issued for the property, not the person or vehicle. If stickers have previously been issued, no additional free stickers will be issued for ANY reason.

Number of Stickers Requested: 1 (free) 2 (free) 3 4

Please circle how many stickers needed.

Property Owner Signature: _____

If you have any questions, please contact the Administration office of the Shoshone County Solid Waste Department at (208) 784-5190

Property AIN: _____

Sticker #1: _____	Issued Date: _____
Sticker #2: _____	
Sticker #3: _____	Payment for additional stickers: _____
Sticker #4: _____	