You Must Pre-register to Use the HHW Depot

Please fill out form and mail at least two weeks before the appointment to:

SW/WCSWMD
P. O. Box 320
Ascutney, VT 05030

Or scan this form and send it as an attachment to mobrien@marcvt.org
Or fax this form to 802-674-5711

Person to contact: _____

Mailing Address of Business/School: _____

_____

Phone: _____

Name of Chemical	**Amount** of Chemical

Please use back of page if needed.

You will be contacted with disposal cost.

Name of Chemical	**Amount** of Chemical