



NEIGHBORHOOD LITTER PATROL APPLICATION FORM

1. Please describe the area you would like to clean. Provide the area you intend to clean up including cross-street to cross-street or address to address information. Describe the work area (*for example the description might read: Cleanup will be along both sides of S Hosmer Street from S 42nd Street to S 46th Street including all right-of-way and excluding alleys and private property.*):

2. First Name:

Last Name:

3. E-mail address:

4. Phone Number:

5. Mailing Address:

6. Liability Description: I understand that by registering to receive materials in support of this program, I am registering for materials only and am not a volunteer for the City. I further understand that any participants that I may choose to work with on this project are selected by me and the City has no responsibility for them. By registering for, and obtaining materials from, the City of Tacoma to support this program, I agree to indemnify and hold harmless the City of Tacoma from responsibility, damage, or liability arising out of the use of the materials I receive under this agreement. I agree that I, and any participants I choose to work with me, will use all necessary safety precautions to ensure the safety of everyone. This registration agreement may be terminated by the City of Tacoma at any time the registrant does not comply with this agreement, or any time the registrant's work effort is considered unsafe. The City of Tacoma reserves the right to revise or discontinue the program at any time. I hereby agree that this cleanup effort is being performed for the benefit of the community and that I am not considered a volunteer for the City of Tacoma. I also understand and agree that improper use of my cleanup voucher may result in paying costs associated with dumping at the solid waste recovery and transfer center and the potential loss of any future dumping privileges at the Center.

Signature of Registrant:

7. For disposal, I prefer (circle answer): Personal garbage can or Dump Pass or Pick-Up by Tidy-Up

8. Enter the number of each item that you would like (if none, enter zero):

Garbage bags: _____

Safety Vests: _____

Pairs of gloves: _____

Trash Grabbers: _____

9. Additional information or questions for staff: