## AFFIDAVIT TO OPT OUT FOR SOLID WASTE SERVICES PROVIDED IN THE TOWNSHIP OF BRUNSWICK HILLS

To opt out of solid waste services provided in Brunswick Hills Township by Republic Services, I hereby file this affidavit stating such. Affidavits **must** be submitted annually. Current period dates to submit forms are January 29<sup>th</sup> from 10:00 AM to Noon, January 30<sup>th</sup> from 6:00 PM to 7:30 PM, and January 31<sup>st</sup> from 6:00 PM to 7:30 PM at the Brunswick Hills Town Hall located at 1918 Pearl Road, Brunswick Hills, OH. During these times, either the Fiscal Officer or Township Administrative Assistant will be available to notarize your form.

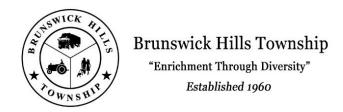
You may deliver in person, fax or email your completed original affidavit forms to the following address, email or fax number. Our office will review this form and approval will be determined on a case-by-case basis. Office hours are Monday thru Wednesday 8 AM - 2:00 PM. Both Forms Must be Completed and Submitted for consideration.

Brunswick Hills Town Hall Sally Galanek 1918 Pearl Road Brunswick Hills, Ohio 44212

Fax: 330-273-7343

Email: sgalanek@brunswickhillstwp.org

Resident's Name:	
Property Address:	
Reason for Opting Out (check one):	
☐ I receive commercial solid waste service or	n my property for my business.
•	mission of the business owner, as evidenced by the owner' mercial solid waste service at that location.
Business Owner's Signature (If Applicab	le): Date:
☐ I will be utilizing the solid waste services p	provided by the Medina County Solid Waste District.
including recycling services, and have other means another residential solid waste collection service a	ot utilizing Brunswick Hills Township's solid waste services as of disposing such solid waste. I am prohibited from utilizing at my residence. If, at any time, if there is cause to believe that with this affidavit, Brunswick Hills Township will notify me imposed on me.
Resident's Signature:	Date:



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State of Ohio	
County of	
	, 2024, before me, the undersigned Notary Public, personally appeared sonally known to me (or proved to me on the basis of satisfactory evidence)
	is/are subscribed to the within instrument and acknowledged to me that
he/she/they executed the same in his	s/her/their authorized capacity(ies), and that by his/her/their signature(s) or
the instrument, the person(s) or the e	entity upon which the person(s) acted, executed the instrument.
WITNESS my hand and official seal	
Notary Public	
Print Name:	
	[SEAL]
My commission expires:	
FOR BRUNSWICK HILLS TOWN	SHIP (TRUSTEE) USE ONLY:
Review date:	, 2024
Request Approved	Request Denied
Comments:	
Brunswick Hills Trustee signature	