<u>DECLARATION TO OPT OUT FOR SOLID WASTE SERVICES – 2025</u> PROVIDED BY THE TOWNSHIP OF BRUNSWICK HILLS

To opt out of solid waste services provided in Brunswick Hills Township, I hereby file this declaration stating such. In order to continue, declarations must be renewed annually, no later than January 31, beginning with 2026.

You may deliver, in person, by email, or by mail, your original declaration, to the following address. Our office will review this form, and approval will be determined on a case-by-case basis. Our office will review this form, and approval will be determined on a case-by-case basis. Office hours are Monday-Friday 7 AM-3 PM.

Ellen Young , Brunswick Hills Police Department 505 Substation Road Brunswick Hills, Ohio 44212

Resident's	Name:			
Property A	ddress:			
Phone Nun	nber: Email Address:			
Reason for	Opting Out (check one):			
	eceive commercial solid waste service on my property for my business.			
	☐ I own my own business, or have the permission of the business owner, as evidenced by the owner's signature below, and will be using the commercial solid waste service at that location.			
□ Was	I will be utilizing the solid waste services provided by the Medina County Solid ste District.			
By signing my name below, I agree that I am not utilizing Brunswick Hills Township's solid waste services, including recycling services, and have other means of disposing such solid waste. I am prohibited from utilizing another residential solid waste collection service at my residence. If, at any time, if there is cause to believe that solid waste is not being disposed of in accordance with this affidavit, Brunswick Hills Township will notify me in writing of such and solid waste services shall be imposed on me.				
Resident's	Signature: Date:			
FOR BRUNSWICK HILLS TOWNSHIP (TRUSTEE) USE ONLY:				
Review Dai	te:, 2025Request ApprovedRequest Denied			
Brunswick	Hills Township Trustee Signature:			

<u>PROVIDED BY THE TOWNSHIP OF BRUNSWICK HILLS</u>

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Ellen Young , Brunswick Hills Police Department 505 Substation Road Brunswick Hills, Ohio 44212

Phone: (330) 225-8300 Fax: 330-273-2721 Email: eyoung@brunswickhillspolice.com

Resident's Name:

Property A	Address:			
		Email Address:		
Reason for Opting Out (check one):				
	I receive commercial solid waste	service on my property for my business.		
	☐ I own my own business, or have the permission of the business owner, as evidenced by the owner's signature below, and will be using the commercial solid waste service at that location.			
	I will be utilizing the solid waste ste District.	services provided by the Medina County Solid		
By signing my name below, I agree that I am not utilizing Brunswick Hills Township's solid waste services, including recycling services, and have other means of disposing such solid waste. I am prohibited from utilizing another residential solid waste collection service at my residence. If, at any time, if there is cause to believe that solid waste is not being disposed of in accordance with this affidavit, Brunswick Hills Township will notify me in writing of such and solid waste services shall be imposed on me.				
Resident's Signature: Date:				
FOR BRUNSWICK HILLS TOWNSHIP (TRUSTEE) USE ONLY:				
Review Da	te:, 2025	Request Approved Request Denied		
Brunswick Hills Township Trustee Signature:				

<u>DECLARATION TO OPT OUT FOR SOLID WASTE SERVICES – 2027</u> PROVIDED BY THE TOWNSHIP OF BRUNSWICK HILLS

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Ellen Young , Brunswick Hills Police Department 505 Substation Road Brunswick Hills, Ohio 44212

Resident's Name:						
Property Address:						
Phone Number: _	Email Address:					
Reason for Opting	Out (check one):					
☐ I rece	ve commercial solid waste service on my property for my business.					
	own my own business, or have the permission of the business owner, as evidenced owner's signature below, and will be using the commercial solid waste service at cation.					
☐ I will Waste Dist	be utilizing the solid waste services provided by the Medina County Solid trict.					
By signing my name below, I agree that I am not utilizing Brunswick Hills Township's solid waste services, including recycling services, and have other means of disposing such solid waste. I am prohibited from utilizing another residential solid waste collection service at my residence. If, at any time, if there is cause to believe that solid waste is not being disposed of in accordance with this affidavit, Brunswick Hills Township will notify me in writing of such and solid waste services shall be imposed on me.						
Resident's Signatu	re: Date:					
FOR BRUNSWICK HILLS TOWNSHIP (TRUSTEE) USE ONLY:						
Review Date:	, 2025 Request Approved Request Denied					
Brunswick Hills Township Trustee Signature:						

<u>DECLARATION TO OPT OUT FOR SOLID WASTE SERVICES – 2028</u> PROVIDED BY THE TOWNSHIP OF BRUNSWICK HILLS

To opt out of solid waste services provided in Brunswick Hills Township, I hereby file this declaration stating such. In order to continue, declarations must be renewed annually, no later than January 31, beginning with 2026.

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Ellen Young , Brunswick Hills Police Department 505 Substation Road Brunswick Hills, Ohio 44212

Resident's N	Jame:				
	dress:				
	per: Email Address:				
Reason for Opting Out (check one):					
	I receive commercial solid waste service on my property for my business.				
	n my own business, or have the permission of the business owner, as evidenced oner's signature below, and will be using the commercial solid waste service at ion.				
	I will be utilizing the solid waste services provided by the Medina County Solid e District.				
By signing my name below, I agree that I am not utilizing Brunswick Hills Township's solid waste services, including recycling services, and have other means of disposing such solid waste. I am prohibited from utilizing another residential solid waste collection service at my residence. If, at any time, if there is cause to believe that solid waste is not being disposed of in accordance with this affidavit, Brunswick Hills Township will notify me in writing of such and solid waste services shall be imposed on me.					
Resident's Si	ignature: Date:				
FOR BRUNSWICK HILLS TOWNSHIP (TRUSTEE) USE ONLY:					
Review Date	:, 2025 Request Approved Request Denied				
Brunswick Hills Township Trustee Signature:					

<u>DECLARATION TO OPT OUT FOR SOLID WASTE SERVICES – 2029</u> PROVIDED BY THE TOWNSHIP OF BRUNSWICK HILLS

To opt out of solid waste services provided in Brunswick Hills Township, I hereby file this declaration stating such. In order to continue, declarations must be renewed annually, no later than January 31, beginning with 2026.

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Ellen Young , Brunswick Hills Police Department 505 Substation Road Brunswick Hills, Ohio 44212

Resident's	s Name:				
Property A	Address:				
Phone Number:		Email Address:			
Reason for	r Opting Out (check one):				
	I receive commercial solid v	receive commercial solid waste service on my property for my business.			
-	☐ I own my own business, or have the permission of the business owner, as evidenced by the owner's signature below, and will be using the commercial solid waste service at that location.				
□ Wa	☐ I will be utilizing the solid waste services provided by the Medina County Solid Waste District.				
waste servi I am prohil If, at any ti with this a	g my name below, I agree that it ices, including recycling servi- bited from utilizing another re ime, if there is cause to believe ffidavit, Brunswick Hills Town hall be imposed on me.	ces, and have other means sidential solid waste collect that solid waste is not be	of disposing such solid waste. ction service at my residence. ing disposed of in accordance		
Resident's	Signature:	I	Oate:		
FOR BRU	NSWICK HILLS TOWNSHI	P (TRUSTEE) USE ONL	.Y:		
Review Da	ate:, 20.	25 Request Appro	ved Request Denied		
Brunswick	Hills Township Trustee Signa	ture:			