

GREEN COUNTY LANDFILL
DUMP PERMIT
FOR THE VILLAGE OF ALBANY

NAME: _____

ADDRESS: _____

This authorizes the above-named person to dump at the Green County Landfill. This permit is good for a total of _____ ton(s) and must be used within a thirty (30) day period from the date of this permit.

DATED: _____

RECEIPT NUMBER: _____

AMOUNT RECEIVED: _____

For the Village:

SIGNED: _____ DATE: _____