

# APPLICATION FOR LICENSE

CITY OF YANKTON, STATE OF SOUTH DAKOTA

To the Honorable Mayor and Board of City Commissioners:

Application for license to engage in the business of **Commercial Collector of Solid Waste** (formerly known as Private Collector of Refuse) located at Yankton, South Dakota, for the period of one year from

January 1, \_\_\_\_\_ to December 31, \_\_\_\_\_.

Check one: NEW  RENEWAL

**FEE: \$50.00/yr. for first vehicle plus \$25.00/yr. for each additional vehicle**

Number of Vehicles used to Transport Garbage: \_\_\_\_\_ Total Fee: \_\_\_\_\_

Name of Legal Business: \_\_\_\_\_

**Doing Business As:** \_\_\_\_\_

Mailing Address (street, city, state, zip): \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Do you have customers within Yankton city limits? Yes  No

Schedule of Charges: \_\_\_\_\_

Schedule of Collection Times: \_\_\_\_\_

List of Drivers/Workers: \_\_\_\_\_

Vehicle Year, Type, Color, & License Plate Number: \_\_\_\_\_

*For two or more vehicles, add to the back page of this application*

Insurance Policy # & Carrier: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

*Attach a certificate of liability insurance showing coverage limits for bodily injury and property damage.*

*Signing this application certifies that you will keep your insurance active during the term of this license.*

By: \_\_\_\_\_ Title: \_\_\_\_\_

**Applicant's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Please refer to the attached Municipal Code— Chapter 10: Articles III & IV: Sec. 10-20 to Sect. 10-41.  
To see the City's Municipal code online go to [cityofyankton.org](http://cityofyankton.org) under "Public Documents"

**Instructions: File this application form along with the appropriate license fee and proof of liability insurance to the City Finance Officer, PO Box 176, Yankton, SD 57078. Please include a Certificate of Exemption if exempt from sales tax. Questions? Contact: [license@cityofyankton.org](mailto:license@cityofyankton.org)**

*For Finance Office Use Only:*

City Commission Meeting Date: \_\_\_\_\_ Applicant is hereby approved: \_\_\_\_\_

Fee Paid \$ \_\_\_\_\_ Receipt No. \_\_\_\_\_ License No. \_\_\_\_\_

*For additional vehicles:*

List vehicle year, type, color, & license plate number

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

5. \_\_\_\_\_

6. \_\_\_\_\_

7. \_\_\_\_\_

8. \_\_\_\_\_

9. \_\_\_\_\_