



www.aikencountysc.gov

Aiken County
Solid Waste Division
1930 University Parkway, Suite 3400
Aiken, SC 29801
(803) 642-1533

REQUEST FOR WAIVING LANDFILL FEES

Request #: _____

Aiken County should not charge for disposal of my material(s) because: _____

Requestor: _____ Requestor Signature: _____ Date: _____

Mailing Address: _____

Origin Address (if different): _____

Phone #: _____ (h) _____ (w) _____ (other)

Materials being disposed: if you cannot estimate the weight, provide the volume in cubic yards.

Table with 4 columns: DESCRIPTION, WEIGHT (TONS), VOLUME (CUBIC YARDS), VALUE (OFFICE USE ONLY). Rows include Concrete, Construction Debris, Land Clearing, Tires, Yard Debris, and three empty rows.

Estimated Date Disposal to Begin: _____ Estimated Duration of Project: _____ [] days [] weeks

Hauler Name(s): _____

Hauler Address: _____

Please return this form to Public Works for processing. Normal processing time will be 3 to 5 business days for complete applications.

OFFICE USE ONLY
Request taken by: _____ Requestor Notified By: _____ Date: _____
Solid Waste Supervisor Recommendation: [] Waive Fee [] Do Not Waive Fee Signature/Date _____
Public Works Director Recommendation: [] Waive Fee [] Do Not Waive Fee Signature/Date _____
County Administrator Approval: [] Waive Fee [] Do Not Waive Fee Signature/Date _____