



DISTRICT OF PARRY SOUND

56 ONTARIO STREET
PO BOX 533
BURK'S FALLS, ON
POA 1C0

(705) 382-3332

Fax: (705) 382-2068

Email: landfill@armourtownship.ca

Website: www.armourtownship.ca

AUTHORIZATION FORM REQUEST TO MAIL LANDFILL CARD

If you are unable to attend the Municipal Office in person to pick up the Landfill Card, please complete this form, sign it, and email to the Administrative Assistant at admin@armourtownship.ca

Your first and last name:	
Mailing address:	
Your phone number:	
Civic address of the property eligible to receive a Landfill Card in the Township of Armour	

By completing and signing this form, I hereby confirm that I am a resident of the Township of Armour and authorize the administrative staff to mail my Landfill Card.

I UNDERSTAND THAT BY SIGNING THIS FORM AND REQUESTING THE MAILOUT, I ASSUME RESPONSIBILITY FOR THE LANDFILL CARD WITH CANADA POST. I ALSO UNDERSTAND THAT IF THE CARD IS NOT RECEIVED, I WILL BE EXPECTED TO PURCHASE THE REPLACEMENT CARD.

Property Owner

Date