



UMATILLA COUNTY
VOLUNTEER CLEAN~UP PROGRAM

Umatilla County has designated funds to provide incentive to volunteers who are willing to undertake clean up projects. The funds available will pay for the tippage fees when properly disposing of the solid waste collected by your group. To qualify for these funds, you must meet the following criteria;

1. The area to be cleaned up must be a public area in unincorporated Umatilla County
2. The group must provide the materials for the clean-up (i.e. bags, safety gear, etc)
3. A completed application must be submitted 30 days prior to the clean-up date

NAME of ORGANIZATION: _____

ADDRESS: _____

CONTACT PHONE #: _____

CONTACT PERSON: _____

1.) Describe the location of the area you propose to clean up (name roads & cross streets) : _____

2.) What date (s) and time (s) will you be doing the clean-up: _____

3.) Which disposal site will you take the waste to that you have gathered: (please circle one)

- a) Humbert's Refuse & Recycle ~ 79378 Gerking Flat Rd Athena, OR (541)938-4188
- b) Pendleton Sanitary Service : 5500 NW Rieth Rd Pendleton, OR (541)276-1271
- c) Sanitary Disposal : 81144 N Hwy 395 Hermiston, OR (541)567-8842

4.) What type of safety materials do you plan to provide for your volunteers: _____

Following your clean-up project, all solid waste collected should be disposed of at the approved disposal site. Please provide copies of your disposal receipts to this office once your project is completed. Thank you for your efforts to help keep Umatilla County looking great!

Applicant assumes any liability for the clean up activities. Applicant will defend, save and hold harmless the County, its Board, officers and employees from all claims, suits, or actions of whatever nature resulting from or arising out of the activities of the Applicant or its agents or employees pursuant to the clean up activities. If working alongside a roadway, Applicant may require authorization from the proper road jurisdiction authority.

Signature of Applicant/Representative

Date

For Office Use Only

Date received: _____

Date approved: _____

Date verified: _____

Date paid: _____

Franchise notified: _____

Applicant notified: _____