



APPLICATION FORM  
**TRANSFER STATION RESIDENT PASS**

2024 ESSEX, CONNECTICUT

Year Runs from January 1 to December 31

To be completed by the applicant:

**MAILING ADDRESS:** (P.O. Box Acceptable.)

DATE\_\_\_\_/\_\_\_\_/\_\_\_\_

1<sup>ST</sup> VEH. OWNER ---LAST NAME\_\_\_\_\_ FIRST NAME\_\_\_\_\_

2<sup>ND</sup> VEH. OWNER ---LAST NAME\_\_\_\_\_ FIRST NAME\_\_\_\_\_

STREET ADDRESS (Or P.O. BOX)\_\_\_\_\_

VILLAGE\_\_\_\_\_ ZIP CODE\_\_\_\_\_

TELEPHONE: HOME: (\_\_\_\_)-\_\_\_\_-\_\_\_\_ CELL: (\_\_\_\_)-\_\_\_\_-\_\_\_\_

**STREET ADDRESS IF DIFFERENT FROM MAILING ADDRESS:**

STREET ADDRESS \_\_\_\_\_

CITY\_\_\_\_\_ STATE\_\_\_\_\_ ZIP CODE\_\_\_\_\_

VEHICLE #1 - LIC PLATE # \_\_\_\_\_

VEHICLE #2 - LIC PLATE# \_\_\_\_\_

RESIDENT FEE: \$150/yr; SENIOR RESIDENT (65+): \$100/yr; **CASH/CHECK/CREDIT CARD ACCEPTED**

**IF YOU ARE A PROPERTY OWNER WITH TENANTS:**

THE COST IS THE RESIDENT FEE: \$150/yr; SENIOR RESIDENT (65+): \$100/yr.

**IF THIS IS A NEW APPLICATION IT MUST BE ACCOMPANIED BY PHOTO ID. THOSE WITH OUT OF STATE DOCUMENTATION MUST PROVIDE PROOF OF PERIODICAL RESIDENCY IN ESSEX. THANK YOU.**

**\*\*\*\*\*PLEASE NOTIFY TOWN OF ESSEX OF ANY CHANGE OF VEHICLE\*\*\*\*\***