



Marshall County Landfill's Event Recycling Stand Loan Program

Email to: jenn@marshallcountylandfill.org

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Event & Contact Information (Please Print)

Event Name:
Event Address:
Contact Name:
Contact Address:
Phone: _____ Email: _____
Garbage & Recycling Service Provider:
Event Date:

Equipment Supplied	# of Stands	# of Bags
Clear Stream Frames		
Clear Stream Lids		
Clear Stream Recycle Bags		

Check Out Date: _____ Return Date: _____

____ By signing this form, I pledge to properly follow all guidelines pertaining to usage and damage replacement of the Recycling Event Stands.

____ I understand that I will be charged for the replacement cost of any of the above equipment should it be lost or damaged.

____ In order to keep this program free to users, I agree that it is my responsibility to return all containers in the same clean and working condition as when they were borrowed.

I understand that all stands must be wiped down with disinfectant cleaner prior to return.

____ I agree to return the event stands to the Marshall County Landfill within 48 hours after the event, unless otherwise arranged with the program staff.

Signature: _____ Date: _____

All Returned	Incomplete Return
Clean	Missing Items
Cleaning Fee Assessed	Replacement Fee Assessed

Returning Signature: _____