

Return completed form to:

City Clerk's Office

City of Albert Lea

221 E. Clark St., Albert Lea, MN 56007
507-377-4335

**LICENSE APPLICATION**Refuse and garbage hauler

Please check all that apply:

☐ Commercial \$300.00

☐ Industrial \$325.00

☐ Residential \$150.00

## Please type or print legibly

dmaras@ci.albertlea.mn.us (call to arrange payment)

Applicant:			
Full name			
Home address		_ city, state, zip code	
Home telephone number (daytime)	l		
Email address			
Manager of business:			
•			
Full name Home address		_ city, state, zip code	
. ,			
Business:			
Business name			
Business address		_ city, state, zip code	
Business telephone number (daytir	ne)		
Minnesota Tax ID number	or Fed	eral Tax ID number	
Corporation (if applicable):			
Corporation name			
For each vehicle, please provide the	ne following information:		
<u>Make</u>	Serial number	<u>License number</u>	
1			
2			
3			
4			
5			
6			

Please attach a separate sheet listing the routes/area to be serviced, schedule of pickups, and your rate schedule.

* * * * * * * * * * * * * * * * * * *	* * * * * * * * * * * * * * * * * * * *			
THE UNDERSIGNED HEREBY AGREES TO COMPLY WITH THE TERMS OF THE ALBERT LEA CITY CODE AND THE LAWS OF THE STATE OF MINNESOTA AS THEY RELATE TO THE LICENSING AND OPERATION OF THE LICENSES BEING APPLIED FOR. I UNDERSTAND FALSIFICATION OF ANY PART OF THIS APPLICATION IS CAUSE FOR DENIAL OR REVOCATION.				
Signature	Date			
FOR OFFICE USE				
Date received	Check number/cash/CC			
Fee received for	Fee received for			
Insurance certificate received	City Council approval date			
Processor initials				



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## **INDEMNITY AGREEMENT**

AGREEMENT made thisday of City of Albert Lea, Minnesota herein referred to as, herein refer	"the City" and
	I deliver to the City Clerk, on a form prescribed by the City olding City harmless for any person injury or property ess.
NOW, THEREFORE, in consideration of th	e foregoing, the parties hereto agree as follows:
defend, and hold harmless the City against any an judgments, including reasonable attorney's fees, c matters, for death or injuries to persons or for loss	osts and expenses incurred in connection with such of or damage to property arising out of or in connection any of their agents, contractors or employees of said
2. Indemnity under this agreement shared of Albert Lea.	all commence as of the date of the agreement by the City
<ol> <li>The City agrees to notify licensee in Notice of any indemnified claim.</li> <li>IN WITNESS WHEREOF, the parties here!</li> </ol>	n writing within thirty (30) days of the receipt By the City of to have executed this Agreement.
APPLICANT/LICENSEE	CITY OF ALBERT LEA, MINNESOTA
	By: Its: Mayor
	By: Its: City Clerk



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## RIGHTS OF SUBJECTS OF GOVERNMENT DATA 'TENNESSEN WARNING'

In accordance with the Minnesota Government Data Practices Act, the City of Albert Lea is required to inform you of your rights as they pertain to the information collected about you. Public information is that information which is available to the general public; private information is that information which is available to you, not to the general public; and confidential information is that information which is not available to you or the public. The information we collect from you is either public or private. The separation of that information is as follows:

<u>Public</u> – name and address of applicant(s) <u>Private</u> – all other information collected on the application

The information collected and required from you is to determine your eligibility for a City of Albert Lea license. If you do not supply the required information, the City of Albert Lea will not be able to determine your eligibility.

The dissemination and use of the private data we collect is limited to that necessary for the administration and management of regulatory licenses. Persons or agencies with whom this information may be shared include:

- City of Albert Lea departmental personnel involved in determining your eligibility for a license or administering the program in connection with which the application is submitted.
- Freeborn County departmental personnel involved in the program.
- City Council members (only that information needed to approve the application for a license).
- Federal, State, County, and local and contracted public auditors.
- Law enforcement personnel in the cases of suspected fraud related to the application or license.
- Those individuals or agencies to which you give your express written permission.

Unless otherwise authorized by state statute or federal law, other government agencies utilizing the reported private data must also treat the information as private.

You may wish to exercise your rights as contained in the Minnesota Government Data Practices Act. These rights include:

- The right to see and obtain copies of the data maintained on you.
- The right to be told the contents and meaning of the data.
- The right to contest the accuracy and completeness of the data.

To exercise these rights, contact the City Manager's Office, 221 East Clark Street, Albert Lea, MN 56007-2496.

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Signature	Date
Title	Business Name or Individual's Name