

# Recycling Box Request Form



**Lorain County Solid Waste Management District a  
Department of the Lorain County Board of Commissioners**



Group or Event Name: \_\_\_\_\_ Date of Event: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

Event Address: \_\_\_\_\_

City, State & Zip Code: \_\_\_\_\_

Type of Event:

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Number of Boxes/Lids Requested: \_\_\_\_\_ Number of Liners Requested: \_\_\_\_\_

By submitting a request form, you are agreeing to participate in the District's mission to Reduce, Reuse and Recycle in Lorain County and to reuse your recycling boxes for future events. These boxes have the ability to collapse for easy storage. If you plan to return the boxes after your event, please state so when you turn in your request. Please send request forms to the District's Collection Center Coordinator, Thomas R. Patrick, III via email: [tpatrick@loraincounty.us](mailto:tpatrick@loraincounty.us)

Number of Boxes/Lids Granted: \_\_\_\_\_ Number of Liners Granted: \_\_\_\_\_

Director Signature: \_\_\_\_\_ Date: \_\_\_\_\_