



**Department of Public Works
BUREAU OF ENVIRONMENTAL SERVICES**

HOWARD COUNTY COMPOST BIN PLEDGE

In exchange for a compost bin provided to me at no charge by Howard County's Department of Public Works, I promise to:

1. Read the information packet provided with my compost bin.
2. Direct any questions to the Recycling Division (410-313-6444) or Howard County Master Gardeners (410-313-2070).
3. Compost yard trimmings (leaves, grass, small yard clippings, etc.) generated on my property for two years from today's date (up to bin capacity).
4. Maintain this compost bin at my residence (located in Howard County).

I, the undersigned, certify that I have read and fully understand the above conditions for acceptance of a free compost bin, am a Howard County resident, and have not received a free County issued/approved compost bin in the past. I also understand that if I fail to comply with the above, I am obligated to return the compost bin, or reimburse Howard County for its cost (as of this date, \$22.00).

Signature

Date

Resident Name: _____

Address: _____

Phone: _____

City: _____ State: MD Zip Code: _____

If you would like to receive monthly Recycling e-newsletter, clearly print your email address below:
