

WINDSHIELD STICKER PROGRAM APPLICATION

Date: _____

Property Owner Name: _____
(Please Print)

Renter's Name: _____
(If applicable)

Please provide your current mailing address – where you would like the stickers mailed to upon approval:

(Mailing Address) (City) (State) (Zip)

Telephone Number: (_____) _____ - _____

Kootenai County Property Address:

Street Address City

Requested Stickers: *Two (2) stickers provided for free; Up to 3 additional stickers may be purchased at cost of \$5.00 each. Stickers are NOT necessary for Kootenai County vehicle plates (K##)*

Number of Stickers Requested: 1 2 3 4 5

Payment Enclosed: _____

If you have questions, please contact the Administration office of the Kootenai County Solid Waste Department (208) 446-1430

Office Use Only

Property AIN: _____ SW Fee Year: _____

Sticker #1: _____ Issued Date: _____

Sticker #2: _____ Database Entry: _____

Sticker #3: _____ Application Scanned: _____

Sticker #4: _____ Payment Received: _____

Sticker #5: _____