

Application for Set out/Set back Service for Trash Collection  
Effective 1/1/21

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

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

Birthdate: \_\_\_\_\_

Month/Year only

Contact Phone # \_\_\_\_\_

If disabled/handicap, please provide your Ohio Handicapped Placard/Card

# \_\_\_\_\_ EXPIRES \_\_\_\_\_

Please return this application to:

Village of Lockland

101 North Cooper Avenue

Lockland, Ohio 45215

Email: [jmcgee@locklandoh.org](mailto:jmcgee@locklandoh.org)

If you are unable to fill out and return the application, please call 513-761-1124  
and we will be happy to assist you.