

Application for Set out/Set back Service for Trash Collection

Effective 1/1/24

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

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

Please note applications are due on 12/21/23, any applications received after this date will go into effect the following week.