



REQUEST FOR RECYCLING BIN

NAME: _____

ADDRESS: _____

PHONE: _____

Please enclose a check for \$10.00 Payable to the INCORPORATED VILLAGE OF VALLEY STREAM. Upon receipt of your check, the recycling bin will be delivered and placed at your door.

Mail To:

Incorporated Village Of Valley Stream
Recycling Department
123 South Central Avenue
Valley Stream, New York 11580