



**BOONE COUNTY**  
*Solid Waste Management District*

**Boone County Solid Waste Management District**

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# ClearStream Recycling Bin – Loan Agreement

Name of Organization \_\_\_\_\_

Representative Name \_\_\_\_\_

Address \_\_\_\_\_

Phone Number \_\_\_\_\_

E-mail \_\_\_\_\_

Location of Bins \_\_\_\_\_

# of Bins Requested \_\_\_\_\_ # of Bags Requested \_\_\_\_\_

Estimated Loan Time Period \_\_\_\_\_

**Bin Loan & Reporting Agreement:** *It is understood and agreed upon that the above stated organization will utilize the ClearStream bin(s) at their events. We will track the number of bags that are collected for recycling. This report shall be furnished to the Boone County Solid Waste District via hand delivery or e-mail ([bcswmd@co.boone.in.us](mailto:bcswmd@co.boone.in.us)). This allows the BCSWMD to report to Keep America Beautiful the approximate amount of waste stream that is being diverted and recycled. It is also agreed upon by above said organization that if any bins are lost, stolen, or severely damaged, we will replace said bin to the BCSWMD by the time the loan period is complete.*

**Bin(s) Loan**

Signature \_\_\_\_\_

Printed Name \_\_\_\_\_

Date \_\_\_\_\_

**Bin(s) Return**

Signature \_\_\_\_\_

Printed Name \_\_\_\_\_

Date \_\_\_\_\_

**Office Use Only** \_\_\_\_\_

Bin #s \_\_\_\_\_

District Initials at time of Loan \_\_\_\_\_

Date \_\_\_\_\_

District Initials at time of Return \_\_\_\_\_

Date \_\_\_\_\_

# Bags Reported \_\_\_\_\_

