



West Amwell Township
150 Rocktown-Lamb. Road, Lambertville, NJ 08530-3203
609-397-2054; Fax 609-397-8634; www.westamwelltwp.org

GARBAGE PERMIT INFORMATION

West Amwell Township provides its residents a weekly drop-off service for household garbage at the municipal complex on Rocktown-Lambertville Road on Saturdays from 7:30 a.m. - 12:30 p.m. and Wednesdays from 12:00 – 5:00 p.m. **PERMITS ARE REQUIRED.** There will be a Township Official on site and you are required to have the permit available. The Depot Attendant in charge may request additional identification along with the permit and reserves the right to inspect and refuse drop off of any/all Trash.

The Depot is managed by the Dept. of Public Works & Roads. Call 609-397-3743 with questions regarding trash/recycle disposal and use of the facility.

The Garbage Permit service period runs from July 1st through June 30th of the following year.

RENEWALS: Permit may be obtained in person **at the Depot** during collection hours on Wednesday or Saturday. Please supply proof of residency, e.g. a copy of the previous year's Garbage Permit, tax bill, utility bill, lease agreement, or driver's license, etc.

1st TIME USERS: Please complete the application form below and submit along with proof of residency, e.g. tax bill, utility bill, lease agreement, or driver's license, etc.

Permits may also be purchased by mail by supplying a ***Self-Addressed Stamped Envelope*** to: West Amwell Twp. Clerk's Office, 150 Rocktown-Lambertville Road, Lambertville, NJ 08530.

Payment may be made by cash or check, (sorry no Debit or Credit cards). Make checks payable to: West Amwell Township. Call 609-397-3743 or 609-397-2054 ext. 112 for current cost.

More information about our Depot, Recycling and Brush programs is available on the Township website at: www.westamwelltwp.org

APPLICATION – First Time Users

PLEASE PRINT - Information **MUST** be legible.

Name: _____

Physical Address: _____ Block/Lot# _____

Mailing Address, if different than above: _____

Email Address: _____ Phone# _____

Check one: Do you OWN your home? _____ Do you RENT your home? _____

If you rent, provide owner's name: _____

**Permits are issued in the Property Owner's name with the Tenant's name added.*

Office Use Only:

Date: _____ Additional Information: _____

REV. 6/23/21 SH