



# TOWN OF HOPE MILLS

5770 Rockfish Road  
Hope Mills, North Carolina, 28348  
Telephone (910) 424-4555 ext 3380 Fax (910) 424-4902

## APPLICATION FOR SPECIAL SERVICES

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Reason for Request: \_\_\_\_\_

\*Some handicap or eligibility conditions may require medical verification.

Other persons living with you:

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

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

Special Services Requested: (Check appropriate item)

\_\_\_\_\_ Weekly – Backdoor service, roll out cart pick up.

\_\_\_\_\_ Weekly – Bag exemption for loose piles of leaves, pine straw, pinecones, and grasses at curbside.

\_\_\_\_\_ Monthly – Bulk yard waste pick up at no charge.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Public Works Director: Approved \_\_\_\_\_ Disapproved \_\_\_\_\_ Date \_\_\_\_\_

This completed form should be returned by mail or dropped off at the Town Hall. Completion of this form does not constitute its approval. A visit by the PW Director will determine the validity of the request.