



Public Works Department

Sanitation Division

3720 Leroy Scott Drive, Decatur, GA 30032

404.294.2900 ♦ sanitation@dekalbcountyga.gov ♦ www.dekalbsanitation.com

Residential Garbage Roll Cart Application for New & Existing Customers

Customer Information

Applicant name _____

Service address _____

Email address (required) _____ Phone _____

Type of Property

- Owner Tenant New resident* Single-family Duplex
- Triplex Condominium Townhome
- ADA-assisted collection (*"Request for Disabilities Accommodation" form approval required*)

**New residents receive a standard 65-gallon garbage roll cart, but have the ability to choose the rightsize option*

Rightsize Roll Cart

*95-gallon roll cart requests require prepayment of one-time \$15 fee and mandatory recycling subscription
95-gallon roll cart is limited to one per customer*

Current cart size 35 gallon 45 gallon 65 gallon 95 gallon

Cart size required 35 gallon 45 gallon 65 gallon 95 gallon

Additional Roll Cart

*Requires an increase in annual sanitation assessment fees and mandatory recycling subscription
Additional prorated 2016 annual sanitation assessment fees must be paid in advance of roll cart delivery*

Please confirm acceptance of an increase in annual sanitation assessment fees

Current cart size 35 gallon 45 gallon 65 gallon 95 gallon

Cart size required 35 gallon 45 gallon 65 gallon 95 gallon

Number of additional roll carts required _____

Replacement Roll Cart

Current cart size 35 gallon 45 gallon 65 gallon 95 gallon

Cart size required 35 gallon 45 gallon 65 gallon 95 gallon

Lost Stolen Damaged

*Please mail or drop off the completed application to the Sanitation Division's administrative office,
3720 Leroy Scott Drive, Decatur, GA 30032. Once submitted, please allow up to five business days for
instructions on the next steps of the application process, including the payment of required fees. The
delivery of requested materials will occur within ten business days after the necessary prepayments have
been made, or notification has been received regarding the delivery of requested items.*

For Office Use

Date received	Delivery date	Comments
Account #		
Service request #	Route #	
Lot __ North __ South __ Central __ East		