

Town of Barnstable
Transfer Station and Recycling Center
Mail-In Sticker Program for July 1, 2023- June 30, 2024

Instructions:

1. Return completed and SIGNED application form.
2. Payment can be made by check or money order made payable to the Town of Barnstable or you may fill in your credit card information at the bottom of this form. The first Full Transfer Station sticker is **\$320.00**. The second sticker for the same household is **\$33.00**.
3. Enclose a copy of the current vehicle registration for each vehicle for which a sticker is being purchased.
4. If your vehicle is not registered to a Barnstable residential address, you **must** provide a copy of a valid real estate tax bill, deed or year-round rental agreement showing your name linked to your Barnstable residential address.
5. If your vehicle is leased, a copy of the page in your lease agreement where your name and Barnstable residential address is linked to the vehicle.
6. If your vehicle is registered to a business, please include documentation linking you to the business (business card, pay stub), a copy of current registration and proof of residency as described above.
7. A maximum of two (2) stickers are allowed to be purchased per household.
8. Send all required documentation, the signed application, **and a**

SELF-ADDRESSED STAMPED ENVELOPE to:
Barnstable Transfer Station and Recycling Center
45 Flint Street
Marstons Mills, MA 02648

Application:

Name: _____ Phone Number: _____

Email: _____

Barnstable Address: _____ Village: _____

Vehicle #1	Vehicle #2
Registration # _____	Registration # _____

By purchasing a Transfer Station sticker and signing this application, I agree to comply with all Rules & Regulations of the Barnstable Transfer Station & Recycling Center, including but not limited to those on this form. These rules can be found on our webpage at: <https://www.townofbarnstable.us/Departments/solidwaste/>

Signature: _____ Date: _____

Credit Card Payment:

By signing below, I give permission to the Transfer Station & Recycling Center to charge my credit card for the purchase of a Full Transfer Station sticker(s).

MC/VISA/AMEX/Discover # _____ Exp: ____ / ____

Security Code: MC/VISA/Discover 3-digit: ____ AMEX 4-digit code: ____

Name on Card: _____ Billing Zip Code: _____

PLEASE PRINT

Authorized Signature: _____ Date: _____