



City of Sturgeon Bay
Request for Compost Site Permit

Name: _____

Address: _____

Telephone Number: _____

Year and Make of Vehicle: _____

Vehicle License Plate Number: _____

Color: _____

Signature of Applicant: _____ Date: _____

Mark the Township for the Compost Site Permit.

_____ **\$100.00 For Township of Sturgeon Bay**

_____ **\$100.00 For Township of Sevastopol**

_____ **\$500.00 For Contractors / Landscapers**

Mail Check & form to:

City of Sturgeon Bay

Municipal Services

835 N 14th Ave.

Sturgeon Bay, WI. 54235

For Office Only

_____ **Received**

_____ **Mailed Out**

_____ **Ck #**

_____ **Pass #**