

**AFFIDAVIT TO OPT OUT FOR SOLID WASTE SERVICES**  
**PROVIDED BY THE TOWNSHIP OF BRUNSWICK HILLS**

To opt out of solid waste services provided by Brunswick Hills Township, I hereby file this affidavit stating such. In order to continue, affidavits must be submitted annually, January 24, 2022 at 8AM until February 11, 2022 at 2:30PM.

You may deliver, in person, fax or email your original affidavit, to the following address. Our office will review this form and approval will be determined on a case-by-case basis. Office Hours are Monday, Tuesday, Thursday and Friday from 8AM – 2:30PM. Both Forms Must be Completed and Submitted.

Brunswick Hills Township Complex  
Amanda Cameron-Lenz  
1918 Pearl Road  
Brunswick Hills, Ohio 44212  
Fax: 330-273-7343  
Email: [acameron@brunswickhillstwp.org](mailto:acameron@brunswickhillstwp.org)

Resident's Name: \_\_\_\_\_

Property Address: \_\_\_\_\_

Reason for Opting Out: \_\_\_\_\_

- I receive commercial solid waste service on my property for my business.
- I own my own business, or have the permission of the business owner, as evidenced by the owner's signature below, and will be using the commercial solid waste service at that location.

*Business Owner's Signature (If Applicable):* \_\_\_\_\_ *Date:* \_\_\_\_\_

- I will be utilizing the solid waste services provided by the Medina County Solid Waste District.

By signing my name below, I agree that I am not utilizing Brunswick Hills Township's solid waste services, including recycling services, and have other means of disposing such solid waste. I am prohibited from utilizing another residential solid waste collection service at my residence. If, at any time, if there is cause to believe that solid waste is not being disposed of in accordance with this affidavit, Brunswick Hills Township will notify me in writing of such and solid waste services shall be imposed on me.

Resident's Signature: \_\_\_\_\_

Date: \_\_\_\_\_



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Established 1960

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State of Ohio  
County of \_\_\_\_\_

On this \_\_\_\_ day of \_\_\_\_\_, 2022, before me, the undersigned Notary Public, personally appeared \_\_\_\_\_, personally known to me (or proved to me on the basis of satisfactory evidence) to be person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument, the person(s) or the entity upon which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.

\_\_\_\_\_  
Notary Public  
Print Name: \_\_\_\_\_

[SEAL]

My commission expires: \_\_\_\_\_

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**FOR BRUNSWICK HILLS TOWNSHIP (TRUSTEE) USE ONLY:**

Review date: \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_ Request approved                  \_\_\_\_\_ Request denied

Comments: \_\_\_\_\_

Brunswick Hills Trustee signature: \_\_\_\_\_

Date E-mailed to Rumpke Waste & Recycling Services: \_\_\_\_\_, 20\_\_\_\_



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