

# Adopt-A-Litter Container

## Program Details



**Thank you for your interest in the City of Minneapolis' Adopt-A-Litter Container Program, administered by the Division of Solid Waste and Recycling.**

**Litter containers (LCs) are placed at appropriate locations throughout the City for pedestrians to use for the reduction of street litter in high traffic areas. Any private or other use of a public litter container is in violation of City Ordinance and is a breach of this agreement.**

**The following are requirements for adopting a LC:**

- A. The adoption period is for a minimum of two (2) years.**
- B. The Adopter agrees to maintain plastic liners (bags) in the LCs at all times and keep the surrounding area clear of snow, ice, litter and other refuse.**
- C. The Adopter will work in partnership with the City to maintain the physical condition of the LC. If the LC suffers graffiti, the Adopter will either remove the offense or contact the Clean City Coordinator for assistance. If the LC is damaged, the Adopter will contact Solid Waste and Recycling on (612) 673-2917 for repairs or replacement.**
- D. Select one of two levels of service for the litter container(s):**
  - 1. The Adopter will remove filled bags from the litter container and place them in their garbage cart or waste dumpster whenever the LC is full**
  - or -**
  - 2. The Division of Solid Waste and Recycling will service each LC for a monthly fee: \$12.00 for once-a-week pickup, \$24.00 for twice-a-week pickup and \$36.00 for three-times-a-week pickup, etc., plus tax on your monthly utility bill.**
- E. Either party may cancel or make changes to this agreement with a 30 day written notice of intent.**

**The Adopter accepts the terms of this agreement as authorized by the signature in the appropriate space on the application form.**

**Due to requirement for special equipment to handle the litter containers, delivery time cannot be given in advance. Questions can be directed to the Clean City Coordinator at (612) 673-2789.**

**Send completed application and any correspondence to...**

**City of Minneapolis, Solid Waste & Recycling Division  
Attention: Clean City Coordinator  
309 Second Avenue South Room #210  
Minneapolis, MN 55401-2281 FAX: (612) 673-2250**

# Adopt-A-Litter Container

## Application Form



To participate in the Adopt-A-Litter Container program, complete this application and send it to:

Minneapolis Solid Waste & Recycling Division  
Clean City  
309 2<sup>nd</sup> Avenue South, Room 210  
Minneapolis, MN 55401-2281  
Fax: 612-673-2250

**A. Adopter agrees to adopt a litter container for a minimum of two (2) years. If there is no existing litter container, one will be placed by the City's Solid Waste & Recycling Division staff.**

**B. There are two levels of service (Check One):**

(1) Adopter will empty and maintain litter container. The Adopter agrees to maintain plastic liners in the litter container at all times and keep surrounding area clear of snow, ice, litter and other refuse.

(2) City will empty and maintain litter container  times weekly. (Monthly fee \$12.00 plus tax per container per weekly pickup to be added to the regular utility bill). Utility Bill #   
(Enter Account Number from Utility Bill)

**C. The Adopter will work in partnership with the City to maintain acceptable appearance and physical condition of the litter container.**

**D. The Adopter agrees to notify the City of Minneapolis, Division of Solid Waste & Recycling in writing 30 days in advance of any changes to this agreement.** (Placement date cannot be given due to special equipment needs).

**Name of Adopter:** \_\_\_\_\_

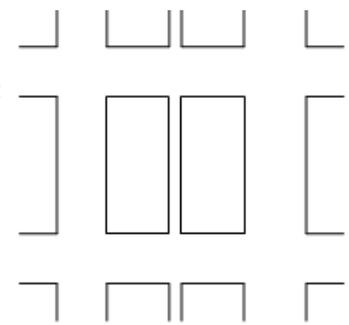
**Address:** \_\_\_\_\_ **Zip 554** \_\_\_\_\_

**Contact Name:** \_\_\_\_\_ **Telephone:** \_\_\_\_\_

PLEASE PRINT

\_\_\_\_\_  
Authorized Signature of Applicant

\_\_\_\_\_  
Date



**Number Requested:**

**Preferred Style of Container (not guaranteed):**

Plastic  Concrete-Smooth  Concrete-Aggregate

**Address for Litter Container(s):** \_\_\_\_\_

Please use 33-gallon plastic bags inside the container for ease of servicing.

**Would you like us to give you an initial supply of bags?**  Yes  No

Place X on map for actual location

**Specific Location Notes:** \_\_\_\_\_

Office Use Only: Date Received: \_\_\_\_\_ Date Placed: \_\_\_\_\_ Block: \_\_\_\_\_ Day: \_\_\_\_\_ District: \_\_\_\_\_