

# Saint Louis **COUNTY** **HEALTH**

## Special Event Recycling Containers Check Out/In Form

Date(s) Requested \_\_\_\_\_ Return Date \_\_\_\_\_

School/Organization \_\_\_\_\_ Address \_\_\_\_\_

Contact Phone \_\_\_\_\_ Contact email \_\_\_\_\_

Event Name: \_\_\_\_\_ # of containers requested \_\_\_\_\_

I understand that the "Clear Stream Recycling Containers" are provided through the Saint Louis County Health Department to collect recyclable materials at a special event. It is my responsibility to return the containers in a clean condition to the Department of Health at 111 S. Meramec at the date and time agreed upon below:

Signature \_\_\_\_\_ Date \_\_\_\_\_

Print Name \_\_\_\_\_

**\*Containers will be returned in clean condition on \_\_\_\_\_ at \_\_\_\_\_**  
*(date) (time)*



**\*Please Contact Mallory Eschbach at  
(314) 615-7833 to Arrange  
Check-Out and Finalize Date and  
Time to Return Containers  
Fax completed form to  
(314) 615-8951 or scan and email to:  
MEschbach@stlouisco.com**

REDUCE • REUSE • RECYCLE  
**GO GREEN!**  
A SAINT LOUIS COUNTY HEALTH DEPARTMENT INITIATIVE