

City of Latrobe  
901 Jefferson Street  
Latrobe, PA 15650

**CITY OF LATROBE APPLICATION FOR TEMPORARY SANITATION SERVICE HOLD**

A Service Hold is allowed for suspending garbage services due to an extended absence of at least four consecutive weeks from your residence for vacation, medical reason, or other valid reason. It is not a legitimate absence to apply for a Service Hold to avoid required garbage service. A Service Hold may not be used to share garbage services with another unit or property.

To be eligible for a Service Hold, the request **MUST** meet the following additional requirements:

- You **MUST** place the Service Hold request with the Sanitation Department **at least two (2) weeks prior** to the requested start date of the Service Hold.
- The length of time for the Service Hold request **must be at least four (4) consecutive weeks minimum** but no more than twenty-six (26) weeks per year.

Address of the property for which a Service Hold is requested:

\_\_\_\_\_ Unit # (if applicable) \_\_\_\_\_

Name of Person requesting Service Hold: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Name of property owner: \_\_\_\_\_

Address of property owner (if different than address for which Service Hold is requested):

\_\_\_\_\_

What is the timeframe for the Service Hold request? (Must be submitted 2 wks prior to start of Service Hold) Start date: \_\_\_\_\_ End date: \_\_\_\_\_

As evidenced by my signature below, I hereby represent, warrant, and certify to the City of Latrobe that I am seeking suspension of my trash collection services for the dates listed above for vacation or other traveling; health reasons; or other similar temporary absence as required by the City of Latrobe Sanitation Program and not to avoid paying for trash collection.

**Certification: I certify by submitting this application that the Service Hold being requested meets the state requirements of a Service Hold, under penalty of the City of Latrobe Code of Ordinances.**

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

You will be contacted within seven (7) business days of receipt of your application with approval or denial or request for additional information. **Please return this form to the City of Latrobe Department of Sanitation, 901 Jefferson Street, Latrobe, PA 15650.**