

COUNTY OF CURRITUCK
PO Box 9, Currituck, NC 27929
Phone – (252) 232-3005

REQUEST FOR RELEASE OF
SOLID WASTE AVAILABILITY FEE
Fax – (252) 232-3568

NAME: _____

MAILING ADDRESS: _____

_____ ZIP CODE: _____

DAYTIME TELEPHONE: _____

TAX PARCEL # (FROM TAX NOTICE): _____

PLEASE CHECK REASON(S) WHY THE AVAILABILITY FEE SHOULD BE
RELEASED. ATTACH ANY SUPPORTING INFORMATION. YOU MUST REAPPLY
EVERY YEAR.

_____ I/We own more than one home in Currituck County and this property sits
vacant or is not used by anyone other than me/us.

_____ A home on this property has been vacant for the last nine (9) months and
there are no plans for it to be occupied during the next six (6) months.

_____ Other (explain) _____

(Use the reverse side if additional space is need)

As owner of the above parcel and improved property, I hereby request a release for the
Solid Waste Collection/Recycling Program Availability Fee.

Signature of Owner Date

PLEASE RETURN THIS FORM AS SOON AS POSSIBLE, BUT NO LATER THAN
JANUARY 31st FOLLOWING THE TAX DUE DATE.

Disposition: _____ Approved
_____ Not Approved

Tracy Sample, Tax Administrator