



Date of request: _____ Date Approved: _____ Rejected: _____

Name of non-profit organization: _____

Proof of 501(c)3 _____ Unavailable: _____

Mailing Address: _____

EIN# _____

Contact Person Name: _____

Cell phone number: _____ Email Address: _____

Project Date: _____

List roads and or locaton the organization will pick up litter (route number/road name)

1. _____

2. _____

3. _____

Estimate number of persons participating (for vests and bag count): _____

Approved by TDA Chairman: _____

Office use:

Bags filled & verified by NCDOT _____ and date: _____

Approved by DOT Supervisor: _____

Number of bags x rate \$10.00 = amount of check to be sent to the above organization no later than thirth (30) days from the project date.

Amount of check: _____ Check number: _____