Town of Canton Transfer Station Permit Form

Name		
Street Address		
Mailing Address (if different)		
Daytime Phone #		
Email		
	0.00 for the first sticker 0 for each additional sticke	er in the household
2. A copy of	ed Transfer Station Permit f the vehicle registration	Form for each vehicle needing a sticker
3. Payment 4 Stamped	(see below) self-addressed envelope to	o: Canton Town Clerk
stampea,	ser unaressed envelope ic	ATTN: Transfer Station PO Box 168 Collinsville, CT 06022
PAYMENT: Pav l	ov CHECK to "Town	of Canton" (preferred - avoid
•	ction fee!) or enter cro	
Credit Card Numbe	r*	
Expiration Date		CVN#
Payment Amount		

*CONVENIENCE FEE-The Town of Canton has partnered with Point & Pay LLC (PNP) a third party service provider to provide you with convenient credit/debit card payments. IN ORDER TO USE THIS SERVICE YOU MUST PAY A NON-REFUNDABLE CONVENIENCE FEE IN ADDITION TO THE AMOUNT OWED. **2.5%** or a \$2 minimum fee (whichever is greater) will be charged in addition to the amount owed. Please note that Point & Pay (not the Town of Canton) will appear as the merchant of record next to your payment on your bank or credit card statement.