

Registration

Spring Clean Up: Pop-Up Transfer Station

Town of Olds Operations Centre **3501 70 Avenue**

First and Last Name: _____

Home Address: _____

Email: _____

My spring clean-up load includes:

Household Waste

Hazardous Household Waste – anything corrosive, flammable, toxic and reactive. To see a list of acceptable hazardous materials, please visit our website.

Other: (please explain)

RULES:

This program is for residents of Olds and not intended for use by businesses, contractors, or non-residents of Olds.

Maximum one (1) vehicle load per household, (or the equivalent of one level truck bed).

Please separate hazardous household materials from regular household waste.

By checking this box, I acknowledge that I am a resident of Olds.

By checking this box, I acknowledge that I have read the guidelines and ensured the items I am bringing are acceptable and no more than the equivalent of one level truck bed.

By checking this box, I understand that loads deemed unacceptable may be refused.

Please email this completed form to waste@olds.ca or drop it off at the Town Administration Building at 4512 46 Street, Olds, AB by **4:30 PM on Thursday, May 22, 2025**.

For questions or concerns please contact **403-994-3500** or email waste@olds.ca