

## Team Up 2 Cleanup Supply Trailer Application Form

Project Coordinator \_\_\_\_\_  
 Phone (Daytime) \_\_\_\_\_  
 Coordinator Address \_\_\_\_\_  
 Email \_\_\_\_\_  
 Driver's License Number or State ID Card (attach copy) \_\_\_\_\_  
 Neighborhood/Project Name \_\_\_\_\_  
 Organization Name (if applicable) \_\_\_\_\_  
 Number of Volunteers involved (minimum often) \_\_\_\_\_

Trailer can be dropped off Monday thru Friday between 8:00 a.m. – 2:00 p.m.  
 List date(s) below.

Trailer Drop Off Date/Time	Trailer Pick Up Date/Time	Cleanup Description or Location	Parking Location of Trailer

**Submit Completed form to:**  
**Public Works Department 1605 Avenue L, Sterling, IL 61081**  
 or email to [mfarmer@sterling-il.gov](mailto:mfarmer@sterling-il.gov)