



Board of County Commissioners

Application for Solid Waste Residential Billing Account

Participation in the County's solid waste collection and disposal system is mandatory for each property owner in the unincorporated areas of San Miguel County. All solid waste rates are imposed pursuant to the County Ordinance No. SMC-11-10-20-OR shall be payable upon billing by the County. Rates billed and not paid shall become delinquent after the due date on the billing invoice sent.

Payment of the solid waste management fees shall be the obligation of the responsible party (Owner) for each residential property located in the unincorporated area of San Miguel County. The solid waste account must be in the responsible party's (Owner) name only, no other persons, including tenants can be on the account.

All payments are to be sent to: County of San Miguel
 Solid Waste Billing Department
 500 W. National Ave. Suite #108
 Las Vegas, New Mexico 87701

DESCRIPTION	ACCOUNT PROVIDED INFORMATION <i>(Please provide information for each of the items listed)</i>
Property Tax Acct.#	
Name of Homeowner	
Physical Address	
Mailing Address	
Email Address (optional)	
Telephone Number	

ANNUAL BILLING: (12 months)

- Regular Resident (**Jan 1 – Mar 31 Discount**) \$174.62 plus tax of \$8.54 for a total of **\$183.16**
- Regular Resident (**April 1 – Dec 31**) \$207.88 plus tax of \$10.39 for a total of **\$218.27**
- Senior Resident (over 65 years of age) \$139.70 plus tax of \$6.84 for a total of **\$146.54**
- Veteran's (approved application) \$139.70 plus tax of \$6.84 for a total of **\$146.54**
- Low Income (approved application) \$139.70 plus tax of \$6.84 for a total of **\$146.54**
- Seasonal Resident (less than 6 months) \$86.71 plus tax of \$4.34 for a total of **91.05**

SEMI-ANNUAL BILLING (6 months)

- Regular Resident \$103.94 plus tax of \$5.20 for a total of **\$109.14**
- Senior Resident (over 65 years of age) \$83.16 plus tax of \$4.09 for a total of **\$87.25**
- Veteran's (approved application) \$83.16 plus tax of \$4.09 for a total of **\$87.25**
- Low Income (approved application) \$83.16 plus tax of \$4.09 for a total of **\$87.25**

ACKNOWLEDGEMENT: I understand it is my responsibility to report changes to the status of my residence in San Miguel County. The proper rate will be assessed based upon the information provide on this application. Failure to report changes may result in additional fees being assessed.

OWNER'S SIGNATURE _____ **DATE** _____

Administration Complex
 500 West National Avenue, Suite 108 Las Vegas, New Mexico 87701 (505) 425-3729

Sample Postcard Invoice

Keep this portion for your records and to be used if you need to visit the convenience center.

Detach this portion and return with your payment for us to ensure the payment is posted to your account. It is perforated for easy separation.

San Miguel County
 500 W. National Ave #108
 Las Vegas Ne 87701
 505-587-1136 505-587-1135
 RETURN SERVICE REQUESTED

Bill Date: 2/5/21 Acct#: 00000

01/21-12/21 ANNUAL BILLING	\$151.96
Sales Tax	\$7.60
Total	\$159.56

Due Date: Sun Mar 7, 2021
 Acct#: Total: \$159.56
 Return this Stub with Payment

Address to mail or deliver your payments.

This shows you the billing period and the amount due. Also, amounts that from an earlier billing will be shown here as "Balance Forward".

The property owners name and mailing address is provided here.

The due date, total amount due and your account number will appear here. Note the account number did not change, it is the same as you had before.

Seasonal Discount

The property owner attests to the statement that they are not a full-time resident of San Miguel County and requests the discount as allowed by the San Miguel County Solid Waste Ordinance which states "*Residential account discounted rate applies if the account does not reside in San Miguel County full-time, less than 6 months annually and has a permanent resident outside San Miguel County.*"

A copy of the property owner's current driver's license is provided as proof of residence.

Account Number _____ Property Owner's Printed Name _____

Date _____ Property Owner's Signature _____

Senior, Veteran or Low-Income Discount

The property owner attests to the statement that they are eligible for one and more of the discounts allowed. *Owner is responsible for submitting an application for the discount, along with proof of eligibility for identified discount.*

Senior -- A copy of the property owner's Medicare and/or Medicaid membership or governmental issued identification with birth date as proof of age.

Veteran -- A copy of the property owner's DD214 or documentation showing determination by New Mexico Veteran's Affairs.

Low-Income -- A copy of the property owner's Medicaid membership or other income support program provided by another governmental agency.

Account Number _____ Property Owner's Printed Name _____

Date of Birth _____ Property Owner's Signature _____