

Complaint Form for Franchise Collection Service in Lexington County



Please complete the following form **ONLY** if you live in the **UNINCORPORATED** areas of Lexington County and subscribe to residential collection services.

See the County of Lexington Website for Collection within a Municipality.

1. Name:
2. Street Address: Subdivision:
3. City:
4. Telephone #: (Home) (Cell) (Work)
5. Email Address:
6. Indicate the name of your service provider:
7. Select Trash Collection Day from the following list:
8. Type of Waste: Yard Waste Recycling
House Waste Other
9. Collection Type: Curbside Backyard
10. Date(s) on which the incident took place (e.g. 4/15/07):
11. Please explain the nature of your complaint:

Thank you for taking the time to fill out this form. We will research your complaint and get back to you as quickly as possible.

PLEASE PRESS SUBMIT BUTTON TO EMAIL THIS FORM BACK TO SOLID WASTE ONCE COMPLETED.

FOR FRANCHISE OFFICE USE ONLY (RESPONSE/ACTION TAKEN)

Was a follow up completed with customer?

Date Responded:

Date Complaint Completed or Resolved:

Company Representative: