

DRAFT

COMMERCIAL COLLECTION SERVICE FRANCHISE APPLICATION CHECK-LIST

Applicant: QUICK Skips dba Florida RemovAll Date: 09.29.25

Status	Brief Description of Application Requirements
☒ Met; 1. ☐ Not	Identity of the applicant, to include its principals, partners, and management. Section 4-1 C. (2)(a)
☒ Met; 2. ☐ Not Met	Evidence the entity is authorized to do business with the State of Florida and in good standing with the Department of State. Section 4-1 C. (2)(a)
☒ Met; 3. ☐ Not Met	Information regarding the experience and qualifications of the applicant and its personnel with regard to Solid Waste collection. Section 4-1 C. (2)(b)
☒ Met; 4. ☐ Not Met	Information about the applicant's (including its principals, partners, and officers) involvement as a subject or as a part in any litigation, criminal proceedings, or agency enforcement cases. Section 4-1 C. (2)(c) MUST BE NOTARIZED
☒ Met; 5. ☐ Not Met	List of all vehicles, equipment and other physical assets [by make, model, capacity, size, type and VIN] the applicant will use to collect and transport Solid Waste when providing Commercial Collection service within Polk County. Section 4-1 C. (2)(d)
☒ Met; 6. ☐ Not Met	List identifying the frequency of Commercial Collection Service applicant provides to its customers with the identification number, size, capacity, and type of each dumpster, roll cart, roll-off Container and compactor that the applicant will use to collect Commercial Solid Waste within the County. Section 4-1 C. (2)(e)
☒ Met; 7. ☐ Not Met	Applicant's acknowledgment and consent the County has the right to inspect the applicant's vehicles, Containers, compactors and other equipment at any time. Section 4-1 C. (2)(f)
☒ Met; 8. ☐ Not Met	Original Certificates of Insurance evidencing current compliance with CGL coverage (NLT \$2M per occurrence) and State statutory workers' comp. coverage (or waiver). Section 4-1 C. (2)(g) Certificate Holder: Polk County, a political subdivision of the State of Florida. 330 W Church St, Rm 150 Bartow, FL 33830
☒ Met; 9. ☐ Not Met	Evidence the applicant has obtained all permits and licenses required by law or ordinance to provide Commercial Collection Service within the County. Section 4-1 C. (2)(h)
☒ Met 10. ☐ Not Met	Delivery of Sworn affidavit confirming: (i) no unsatisfied judgments pending against the applicant; (ii) no liens of record filed by the IRS or State against the applicant; (iii) applicant will comply with all Ord. requirements and all applicable laws. Section 4-1 C. (2)(i) MUST BE NOTARIZED
☒ Met; 11. ☐ Not Met	Delivery of written indemnity of County from any loss which may result from the applicant, its employees, subcontractors, agents, failure to perform in compliance with the terms of the franchise or the Ordinance. Section 4-1 C. (2)(j) MUST BE NOTARIZED
☒ Met 12. ☐ Not Met	Delivery of applicable Commercial Franchise application fee. Section 4-1 C. (5)

DRAFT

QUICK SKIPS, LLC dba Florida RemovALL

Industry: Solid Waste Management & Recycling **Location:**

Contact: Minesh Patel 407-923-1850 office@floridaremovall.com

Company Overview: Roll off business currently with 2 trucks. Only providing 10, 20 and 30-yard containers.

Name of Company is Quick Skips, LLC dba Florida Removall

Core Services:

- **List what services you**
- **provide**
- Dumpster Roll off services

Experience with Solid Waste:

List your Experience: Been in business for over 2 years and all of our drivers have held CDL licenses for over 10 years.

Identity – See attached Driver's license for Minesh Patel, owner of company.

Evidence to do business in Florida (please see articles of incorporation)

List of Vehicles (2)

2017	Peterbilt	Roll Off	1NPCLPOX1HD450392	P2847H
2009	Kentworth	Roll Off	2NKHLN9X69M254348	P2844H



[Department of State](#) / [Division of Corporations](#) / [Search Records](#) / [Search by Entity Name](#) /

Detail by Entity Name

Florida Limited Liability Company

QUICK SKIPS, LLC

Filing Information

Document Number L23000147951

FEI/EIN Number 92-3303512

Date Filed 03/23/2023

State FL

Status ACTIVE

Principal Address

1106 Ayrshire Street
ORLANDO, FL 32803

Changed: 08/04/2025

Mailing Address

1106 Ayrshire Street
ORLANDO, FL 32803

Changed: 08/04/2025

Registered Agent Name & Address

PATEL, MINESH
1106 Ayrshire Street
ORLANDO, FL 32803

Address Changed: 08/04/2025

Authorized Person(s) Detail

Name & Address

Title MGR

PATEL, MINESH
1106 Ayrshire Street
ORLANDO, FL 32803

Annual Reports

Report Year	Filed Date
2024	01/22/2024
2025	01/14/2025
2025	08/04/2025

Document Images

08/04/2025 -- AMENDED ANNUAL REPORT	View image in PDF format
01/14/2025 -- ANNUAL REPORT	View image in PDF format
01/22/2024 -- ANNUAL REPORT	View image in PDF format
03/23/2023 -- Florida Limited Liability	View image in PDF format

Florida Department of State, Division of Corporations



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

09/26/2025

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Guardian Assurance 735 North Thornton Avenue Orlando FL 32803		CONTACT NAME: Sophia Kerny PHONE (A/C, No. Ext): (407) 300-5603 E-MAIL ADDRESS: sophia@insguardian.com FAX (A/C, No):	
INSURED Quick Skips DBA Florida RemovALL 1010 US HWY 17-92 N Davenport FL 33837		INSURER(S) AFFORDING COVERAGE INSURER A: RT SPECIALTY INSURER B: Evanston Insurance INSURER C: INSURER D: INSURER E: INSURER F:	
		NAIC #	

COVERAGES**CERTIFICATE NUMBER:****REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	☒ COMMERCIAL GENERAL LIABILITY ☐ CLAIMS-MADE ☒ OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: ☒ POLICY ☐ PRO-JECT ☐ LOC OTHER:		APP52422250	07/08/2025	07/08/2026	EACH OCCURRENCE \$ 1,000,000
		DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000				
		MED EXP (Any one person) \$ 5,000				
		PERSONAL & ADV INJURY \$ 1,000,000				
	GENERAL AGGREGATE \$ 2,000,000				PRODUCTS - COMP/OP AGG \$ 2,000,000	
						\$
	AUTOMOBILE LIABILITY ☐ ANY AUTO ☐ OWNED AUTOS ONLY ☐ HIRED AUTOS ONLY ☐ SCHEDULED AUTOS ☐ NON-OWNED AUTOS ONLY					COMBINED SINGLE LIMIT (Ea accident) \$
						BODILY INJURY (Per person) \$
						BODILY INJURY (Per accident) \$
						PROPERTY DAMAGE (Per accident) \$
						\$
B	☐ UMBRELLA LIAB ☒ OCCUR ☒ EXCESS LIAB ☐ CLAIMS-MADE DED RETENTION \$		APP52422250	09/26/2025	07/08/2026	EACH OCCURRENCE \$ 2,000,000
		AGGREGATE \$ 2,000,000				
						\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) ☐ Y/N If yes, describe under DESCRIPTION OF OPERATIONS below	N/A				PER STATUTE OTH-ER
						E.I. EACH ACCIDENT \$
						E.I. DISEASE - EA EMPLOYEE \$
						E.I. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Certificate is issued as evidence of insurance per policy terms, conditions, and exclusions.

CERTIFICATE HOLDER**CANCELLATION**

Polk County Solid Waste

10 Environmental Loop S
Winter Haven

FL 33880

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

9/24/2025

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an **ADDITIONAL INSURED**, the policy(ies) must have **ADDITIONAL INSURED** provisions or be endorsed. If **SUBROGATION IS WAIVED**, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER 925 Partners Insurance 701 Riverside Park Place Suite 202 Jacksonville FL 32204	CONTACT NAME: Transportation Division PHONE (A/C, No, Ext): 855-925-1200 E-MAIL ADDRESS: transportation@925partners.com FAX (A/C, No): 904-685-8586
INSURED Quick Skips LLC 735 N Thornton Ave Orlando FL 32806	QUICKSKI-01 INSURER(S) AFFORDING COVERAGE INSURER A: Prime Property & Casualty Insu INSURER B: Hamilton Select Insurance Inc INSURER C: Market Insurance Company INSURER D: INSURER E: INSURER F:
	NAIC # 12588 38970

COVERAGES**CERTIFICATE NUMBER:** 513635595**REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	COMMERCIAL GENERAL LIABILITY ☐ CLAIMS-MADE ☐ OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: ☐ POLICY ☐ PRO-JECT ☐ LOC OTHER:					EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) MED EXP (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE PRODUCTS - COMP/OP AGG \$ \$ \$ \$ \$ \$
A	AUTOMOBILE LIABILITY ☐ ANY AUTO ☐ OWNED AUTOS ONLY ☐ HIRED AUTOS ONLY ☒ SCHEDULED AUTOS ☐ NON-OWNED AUTOS ONLY		PC250516520	5/7/2025	5/7/2026	COMBINED SINGLE LIMIT (Ea accident) BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident) PIP \$ 300,000 \$ \$ \$ \$ \$10,000
	UMBRELLA LIAB ☐ EXCESS LIAB ☐ OCCUR ☐ CLAIMS-MADE DED RETENTION \$					EACH OCCURRENCE AGGREGATE \$ \$ \$
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below Y/N ☐ N/A		MWC0226161-02	5/31/2025	5/31/2026	PER STATUTE OTH-ER E.I. EACH ACCIDENT E.I. DISEASE - EA EMPLOYEE E.I. DISEASE - POLICY LIMIT \$ 1,000,000 \$ 1,000,000 \$ 1,000,000
B	Physical Damage; Comp/Collision		B1180D241877121	5/7/2025	5/7/2026	Ded. \$2,500

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

2017 Peterbilt 1NPCLP0X1HD450392 \$100,000
2009 Kenworth 2NKHLLN9X69M254348**CERTIFICATE HOLDER****CANCELLATION**Polk County Solid Waste
10 Environmental Loop S
Winter Haven, FL 33880

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

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POLK COUNTY WASTE & RECYCLING					OFFICE USE ONLY	
NON-EXCLUSIVE COMMERCIAL FRANCHISE ANNUAL VEHICLE LIST					DATE RECEIVED _____	
FRANCHISEE <u>Quick Skips LLC dba</u>					DATE TO AUDITING _____	
FOR YEAR <u>2024/2025</u>					ACCEPTED _____	
VEHICLE MAKE	VEHICLE MODEL	YEAR	TYPE (RO, REL, FEL, ASL, ETC.)	CAPACITY (CU YD)	VEHICLE SIZE (GVW)	VEHICLE IDENTIFICATION NUMBER
Peterbilt	Truck Roll Off	2017	RO	30 cu yd	74000	1NPCLPOX1HD450392
Kenworth	Truck Roll Off	2009	RO	30 cu yd	74000	2NKHHLN9X69M254348

POLK COUNTY WASTE & RECYCLING

NON-EXCLUSIVE COMMERCIAL FRANCHISE ANNUAL CONTAINER LIST

FRANCHISEE Quick Skips LLC

FOR YEAR 2025/2026

OFFICE USE ONLY

DATE RECEIVED _____

DATE TO AUDITING _____

ACCEPTED _____

CUSTOMER NAME	CONTAINER TYPE/SIZE				CAPACITY (CU YD)	COLLECTION FREQUENCY		CONTAINER IDENTIFICATION NUMBER
	DUMPSTER	COMPACTOR	ROLL OFF	OTHER		ON CALL	DAYS/WK	
Dumpsters on								
call only								
see attached								
list								

Roll-Off Containers

#1001

#1002

#1003

#1004

#1005

#1006

#1007

10 YARD CANS

#2001

#2002

#2021

#2022

#2023

#2024

#2025

#2026

#2027

#2028

#2029

#2030

#2031

#2032

#2033

#2034

#2035

#2036

#2037

#2038

#2039

#2040

#2041

#2042

#2043

#2044

#2045

#2046

#2047

20 YARD CANS

#3001

#3002

#3003

#3004

#3005

#3006

#3007
#3008
#3009
#3010
#3011
#3012
#3013
#3014
#3015
#3016
#3017
#3018
#3019
#3021
#3022
#3023
#3026
#3028

30 YARD CANS

Quick Skips, LLC dba Florida RemovALL
1106 Ayrshire St, Orlando, FL 32803
Tel: 407-720-0000 email: office@floridaremovall.com



Wednesday, September 24, 2025

To whom it may concern,

As of today, Quick Skips, LLC dba Florida Removall, Minesh Patel have never and is currently not involved in any type of litigation, criminal proceedings, judgements, and or liens including the internal revenue service and all state and or federal government litigation, agency enforcement cases, or civil suits.

I, Minesh Patel, MGR\Owner of Quick Skips LLC, do attest the above statement to be true and correct.

State Florida

County of Polk

The foregoing instrument was acknowledged before me this 26th day of Sept 2025 Personally Know or Produced identification




Minesh Patel
9/26/25

Florida

CDL



USA

9 CLASS A

10 DEN P217-611-26-500-0

1 PATEL

2 MINESH

8 1106 AYRSHIRE ST
ORLANDO, FL 32803

3 DOB 11/20/1981 15 SEX M

4b EXP 11/20/2028 16 HGT 5'-08"

12 REST NONE 9a END NONE

4a ISS 09/29/2020

5DD X652506304154

REPLACED 06/30/2025

Operation of a motor vehicle constitutes
consent to any sobriety test required by law.



For Your Information: What You Need To Know About Tangible Personal Property

Every individual or firm doing business and located in Polk County is also subject to the tangible personal property requirement.

An initial tangible personal property tax return is required to be filed with the Polk County Property Appraiser's Office by April 1st of the year after the business opens. The initial return is required if the business owns or leases any personal property, without regard to the value of that personal property. In subsequent years, however, no return is required unless the combined value of all business equipment is more than 25,000 dollars.

To file an initial tangible personal property tax return or for additional information, visit Polk County Property Appraiser's Office website, polkpa.org.

POLK COUNTY LOCAL BUSINESS TAX RECEIPT

ACCOUNT NO. 264649

CLASS: B

EXPIRES:

09/30/2026

OWNER NAME

LOCATION

MINESH PATEL

1010 US HIGHWAY 17 92 N
DAVENPORT

BUSINESS NAME AND MAILING ADDRESS

CODE

ACTIVITY TYPE

QUICK SKIPS, LLC

530115

RENTAL SERVICE

QUICK SKIPS, LLC
1106 AYRSHIRE ST
ORLANDO, FL 32803

PROFESSIONAL LICENSE (IF APPLICABLE)

OFFICE OF JOE G. TEDDER, CFC * TAX COLLECTOR

THIS POLK COUNTY LOCAL BUSINESS TAX RECEIPT MUST BE CONSPICUOUSLY
DISPLAYED AT THE BUSINESS LOCATION

PAID - 3554964 10/01/2025 LLM

TAX 72.19

QUICK SKIPS, LLC



AFFIDAVIT SUPPORTING RENEWAL OF NONEXCLUSIVE FRANCHISE TO COLLECT,
REMOVE, AND TRANSPORT COMMERCIAL SOLID WASTE
WITHIN POLK COUNTY

STATE OF FLORIDA
COUNTY OF Orange Polk

Before me, the undersigned notary public authorized to administer oaths, personally appeared Minesh Patel who, first being duly sworn, on oath deposes and states, as follows:

- 1) He is manager, a Florida corporation.
- 2) He has personal knowledge of the facts stated in this Affidavit and that all such facts are true and correct.
- 3) There are no unsatisfied judgments entered against Minesh Patel Quick SKIPS, LLC.
- 4) There are no liens of record filed by the Internal Revenue Service against Minesh Patel Quick SKIPS LLC.
- 5) There are no liens of record filed by the State of Florida, or any agency or subdivision thereof, against Minesh Patel Quick SKIPS LLC.
- 6) Quick SKIPS, LLC Minesh Patel acknowledges and consents that the County shall have the right to inspect ALL vehicles, containers, compactors, and other equipment at any time.
- 7) During the time of the existing Commercial Franchise, Minesh Patel Quick SKIPS LLC has complied with all of the requirements stated in the Polk County Ordinance 13-069 and with all other applicable laws, and if awarded a renewal term will continue to comply with the same.

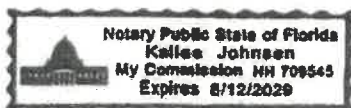
Further the affiant sayeth not.

Dated the September day of 8, 2025

Sworn Person Signature

Minesh Patel
Printed Name and Title of Sworn Person

The foregoing instrument was sworn (or affirmed) and subscribed before me this _____ day of _____, 20____, by _____, who is either ☒ personally known to me; or ☐ has produced _____ as identification.



(AFFIX NOTORIAL SEAL)

Kallee Johnson
Notary Public Signature

Kallee Johnson
Printed Name of Notary Public
11709545 / 8/12/2029
Notary Commission Number/Expiration

INDEMNITY

WHEREAS, THE UNDERSIGNED Minesh Patel
(the "Undersigned"), is the Manager of Quick Skips LLC
(the "Company"), a Florida Company,

WHEREAS, the Manager, is herewith submitting an application to Polk County, a political subdivision of the State of Florida, (the "County") for the grant, renewal, or modification of a non-exclusive commercial franchise (a "Commercial Franchise") to collect, remove and transport commercial solid waste within the geographic areas of Polk County; and

WHEREAS, the Commercial Franchise application process is described in Polk County Ordinance 13-069 (the "Ordinance") and requires, among other matters, that an applicant indemnify the County from and against any loss which may result from the applicant, its employees, subcontractors, and agents, failure to perform in accordance with the terms of the awarded Commercial Franchise and the terms of the Ordinance; and

WHEREAS, the Undersigned is duly authorized to execute this instrument by and on behalf of the Company

NOW, THEREFORE, in consideration of the benefits accruing to the Company Quick Skips and for other good and valuable consideration, the Undersigned, by and on behalf of the Quick Skips LLC does hereby forever release, indemnify, keep, save, and hold harmless the County, its commissioners, officers, officials, and employees, from and against any and all damages, losses, penalties, liabilities, costs and expenses of any kind or nature whatsoever that is proximately caused by, incident to, resulting from, arising out of, or occurring in connection with, directly or indirectly, Quick Skips LLC, its employees, subcontractors, or agents, failure to perform in compliance with the terms of the Commercial Franchise or failure to perform in compliance with the terms of the Ordinance.

IN WITNESS WHEREOF, the Undersigned has executed this instrument by and on behalf of the Company this 24th day of Sept, 2021

ATTEST:

By: _____

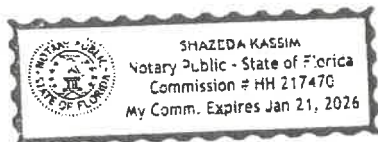
SHAZEDA KASSIM
[Printed Name, Title] SBS

a _____

By: _____

Quick Skips
Minesh Patel
[Printed Name, Title]

AFFIX NOTORIAL SEAL



Thank you for your payment!

This service has been provided by [Polk County BoCC - Solid Waste, FL](#) and [Point & Pay](#). We value your business. Please keep this receipt for future reference.

You have made a payment to [Polk County BoCC - Solid Waste, FL](#). The Polk County BoCC - Solid Waste department Thanks You For Your Payment. Credit Card Services provided by Polk County BoCC - Solid Waste department are in connection with POINT & PAY.

Name: minesh patel
Address: 1106 ayrshire st, orlando FL, US, 32803
Contact: 4079231850
Comments:

Payment ID: 183022701
Date: 09/24/25 01:07 PM
Subtotal: \$750.00
Fee: \$2.95
Total: \$752.95
Method: Electronic Check(*****5286)

Item Purchased	Transaction Description	Account	Amount
Landfill Tipping Fees	CTYPolkWsteGOV	new application fee	\$750.00

Signature: _____ **Date:** ____/____/_____
By signing this receipt you agree to the terms and conditions of this service.

You will see one line item on your credit or debit card statement indicating the amount you paid and will be identified as *CTYPolkWsteGOV*. If you have any questions about the charges please call 1-888-891-6064.

[Print Receipt](#) [Close Window](#)