DEPARTMENT OF
PUBLIC WORKS

Billerica Recycling Contest: Nomination form

Nominee Information

Name: _____

Address: _____

Tell us why you think this person, or household, deserves to be recognized for their recycling efforts.

Include a photo with a date if possible.

Your name: _____ **Date:** _____

Phone Number: _____

Email: _____

For questions contact Recycling Coordinator, Mary Delahanty, at 978-671-1337 or at mdelahanty@town.billerica.ma.us.