



CITY OF PORT ST. LUCIE
KEEP AMERICA BEAUTIFUL ADOPT-A-CITY STREET
LITTER REMOVAL PROGRAM

LITTER REMOVAL FORM

Name of organization: _____

Location: _____

Contact Person: _____

Telephone: _____

Date of Clean-Up: _____

of Miles Adopted: _____

of Volunteers: _____

of Volunteer Hours: _____
(# of volunteers x hours = total)

of Trash Bags: _____

of Recyclables: _____

Do you need the trash bags to be picked up by the City? Yes No

Where are the trash bags located? _____

RETURN TO:

Public Works Department
Attn: Keep PSL Beautiful
450 S.W. Thornhill Drive
Port St. Lucie, FL. 34984
FAX 772.871.7397
KPSLB@cityofpsl.com

*****OFFICE USE ONLY*****

OF CUBIC YARDS RECYCLABLES: _____

OF CUBIC YARDS TRASH: _____