

**City of Tampa Commercial Franchise Application Response**  
**Potential Customers, Paragraph 11**  
**Potential Customers**

**Date submitted:**

MM/DD/YYYY

**Reporting Franchisee:**

(company name)

(company mailing address)

**Yard Address for Containers:**

(address)

[illegible]

**Forms available at:**

[http://www.tampagov.net/dept\\_Solid\\_Waste/](http://www.tampagov.net/dept_Solid_Waste/)