New:X_	·			License Fee:
Renewal:				Receipt #:
	APPLICATIO	N FOR RECYCL	ING LICENS	E
X	Processing Facility \$110.00	Recycling Center \$110.00	Pick-Up _ Station _ \$110.00	Reverse Vending Machine \$110.00
To the Common Co	ouncil of the City of La	a Crosse:	,	
Legal/Real name:	Green Circle Recove	ry, LLC		
Address of above:	2800 Larson St, La	Crosse, WI 54603		
Trade name of bus	iness: Green Circle I	Recovery		
Address of recyclin	g business: 3019 Co	ommerce St, La Cross	se, WI 54603	
Business owner:	Gary Harter, Zach F	Harter, Mathias Harte	r, Naomi Schall	ler
		t, sold or otherwise Incategorized Materi		resses, Mixed Recyclable
and construction ar	nd demolition (C&D) r various sorting and p	•	for recycling an	d recyclables processing, and diversion. This will be safe and operations
License Period: 12	/15/25-6/30/26			
				at the above address within of Ordinances for the City of
		D polish (	7 Det	
		- Junia -	(Signature o	f Applicant)
			23 (Da	ate)
**THE	E ATTACHED PERSO	ONAL DATA SHEET	`	,
OFFICE USE ONL' Customer #:	Y: Granted:	Licens	e#:	

## PERSONAL DATA SHEET (PLEASE PRINT ALL INFORMATION)

Each Officer AND Manager/Person in Charge must complete all the information and must indicate if they have been convicted of any of the following within the last ten (10) years: a felony, a misdemeanor, a statutory violation punishable by forfeiture or a county or municipal ordinance violation. If none, write "none".

	/I AST FIRST & I	FULL MIDDLE NAME)
Home Address: 804 Quin	cy St, Onalaska, WI 54650	TOLL MIDDLE NAME,
	(STREET ADDRE	ESS, CITY, STATE & ZIP)
Date of Birth:	Home Phone:	Daytime Phone:
Violations:		
Name of Officer: Gary H		
Home Address: 614 Oak	•	FULL MIDDLE NAME)
riomo / taarooo. O 1-1 Ouk		ESS, CITY, STATE & ZIP)
Date of Birth:	Home Phone:	Daytime Phone:
Violations:		
Name of Officer: Mathia		
Llaura Addus as NEEZO LL	·	FULL MIDDLE NAME)
HOME Address, NPP/11 H:	aliser Ru i inalaska Wil 5/1650	
1101116 / (da1633: 1400) 0 1 1	auser Rd, Onalaska, WI 54650 (STREET ADDRE	ESS, CITY, STATE & ZIP)
Date of Birth:	(STREET ADDRE	ESS, CITY, STATE & ZIP)  Daytime Phone
Date of Birth:	Home Phone:	Daytime Phone
Date of Birth:	(STREET ADDRE	Daytime Phone
Date of Birth:	Home Phone:	Daytime Phone
Date of Birth:	Home Phone:	Daytime Phone
Date of Birth: Violations:  Name of Officer: Naomi	Home Phone:    Schaller (LAST, FIRST & F	Daytime Phone
Date of Birth: Violations:  Name of Officer: Naomi	Home Phone:  Home Phone:    Compared to the co	Daytime Phone  FULL MIDDLE NAME)
Date of Birth:  Violations:  Name of Officer: Naomi Home Address:N8439 Mo	Home Phone:  Home Phone:  (STREET ADDRE	Daytime Phone  FULL MIDDLE NAME)  ESS, CITY, STATE & ZIP)
Name of Officer: Naomi Home Address:N8439 Mc Date of Birth:	Home Phone:    Compared to the	Daytime Phone  FULL MIDDLE NAME)  ESS, CITY, STATE & ZIP)
Name of Officer: Naomi Home Address:N8439 Mc Date of Birth:	Home Phone:  Home Phone:  (STREET ADDRE	Daytime Phone  FULL MIDDLE NAME)  ESS, CITY, STATE & ZIP)
Name of Officer: Naomi Home Address:N8439 Mc Date of Birth:	Home Phone:    Compared to the	Daytime Phone  FULL MIDDLE NAME)  ESS, CITY, STATE & ZIP)
Date of Birth:  Violations:  Name of Officer: Naomi Home Address:N8439 Mc Date of Birth:  Violations:	Home Phone:    CAST, FIRST & FEW SWAIN Dr, Holmen, WI 54636 (STREET ADDRESS Home Phone:	Daytime Phone  FULL MIDDLE NAME)  ESS, CITY, STATE & ZIP)
Date of Birth:  Violations:  Name of Officer:  Naomi Home Address:N8439 Mc Date of Birth:  Violations:  Name of Officer:	Home Phone:    CAST, FIRST & F.	TULL MIDDLE NAME)  FULL MIDDLE NAME)  Daytime Phone:
Date of Birth:  Violations:  Name of Officer:  Naomi Home Address:N8439 Mc Date of Birth:  Violations:  Name of Officer:	Home Phone:    CAST, FIRST & F.	TULL MIDDLE NAME)  FULL MIDDLE NAME)  Daytime Phone:
Date of Birth:  Violations:  Name of Officer: Naomi Home Address:N8439 Mc Date of Birth:  Violations:  Name of Officer:  Home Address:	Home Phone:    Cast, first & F	FULL MIDDLE NAME)  FULL MIDDLE NAME)  FULL MIDDLE NAME)  FULL MIDDLE NAME)  ESS, CITY, STATE & ZIP)
Date of Birth:  Violations:  Name of Officer:  Naomi Home Address:N8439 Mc Date of Birth:  Violations:  Name of Officer:	Home Phone:    Cast, first & F	TULL MIDDLE NAME)  FULL MIDDLE NAME)  Daytime Phone: