FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

Check this box if no longer subject to
Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1(b).

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

- 1										
	OMB Number:	3235-0287								
	Estimated average burden									
1	hours per response:	0.5								

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person*     OCONNOR JAMES E						2. Issuer Name and Ticker or Trading Symbol REPUBLIC SERVICES INC [ RSG ]								elationship of ck all applications of ck all application of the character	able)	g Perso	on(s) to Issu 10% Ow Other (s	ner	
(Last) (First) (Middle) 110 S.E. 6TH STREET 28TH FLOOR						3. Date of Earliest Transaction (Month/Day/Year) 12/09/2008								X Officer (give title Other (specify below)  Chairman/Chief Executive Offic					
(Street) FORT LAUDERDALE FL 33301					4.	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person  Form filed by More than One Reporting Person					
(City)	(S	State)	(Zip)																
		Та	ble I - No	n-Dei	rivativ	ve Se	ecurities	s Ac	quired,	Dis	posed o	of, or Be	neficially	Owned					
1. Title of Security (Instr. 3)  2. Transac Date (Month/Da					Execution Date,		Date,	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4			Beneficial Following	lly Owned Reported	Form	: Direct I Indirect I str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
							Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)				msu. 4)			
Common Stock 12/09/2				09/200	2008		A <sup>(1)</sup>		106,38	3 A	\$0.00	452,493.6805 <sup>(2)</sup>			D				
Common Stock													1,539.0	)384 <sup>(3)</sup>		I	By 401(k) Plan		
			Table II -								osed of converti			Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution I if any (Month/Day	Date,	Code (In				6. Date Expiration (Month/Da	n Date	of Securities		ies g Security	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction	e s ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				С	Code	v	(A)		Date Exercisal		Expiration Date	Title	Amount or Number of Shares		(Instr. 4)	ion(s)			
Employee Stock Option (right to	\$23.74	12/09/2008			A		237,640		(4)		12/09/2015	Common Stock	237,640	\$0.00	237,64	40	D		

## **Explanation of Responses:**

- 1. Grant of restricted shares of common stock pursuant to the Republic Services, Inc. 2007 Stock Incentive Plan. The award vests in 4 equal annual installments commencing December 9, 2009.
- 2. The total reflects contributions to, and dividends paid under, the Company's Deferred Compensation Plan and the Employee Stock Purchase Plan since the last report filed.
- 3. The total reflects dividends paid under the Company's 401(k) Plan since the last report filed.
- 4. Non-Qualified Stock Option awarded pursuant to the Republic Services, Inc. 2007 Stock Incentive Plan. The option vests in 4 equal annual installments commencing December 9, 2009.

## Remarks:

/s/ David A. Barclay, Attorney-

12/11/2008

\*\* Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- \* If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- \*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.