

CITY OF WEST ORANGE

APPLICATION FOR SECOND/ADDITIONAL CART SERVICE

Name: _____ Date of application: _____

DL #: _____ (Provide copy) State DL issued: _____

Spouse or other occupant name: _____

Home Tel # _____ Cell # _____ Other # _____

Street Address for Service: _____, West Orange, TX, 77630

Billing Address: _____

Place of employment: _____

Location of employment: _____ Work tel #: _____

Number of **additional** carts requested: _____

RESIDENTIAL	
Regular Service	Additional Cart(s) each
\$21.60	\$11.00
\$ 1.70	\$ 0.83
\$23.30	\$11.83

Rates/Fees
Tax
TOTAL

Commercial	
Regular Service	Additional Cart(s) each
\$40.12	\$21.00
\$ 3.23	\$ 1.65
\$43.35	\$22.65

The rates listed are the rates in effect at the time of starting service. Rates/fees and taxes are subject to change. **WE DO NOT PRO-RATE MONTHLY CHARGES.** All requirements of the regular sanitation service apply to 2nd/additional cart services.

If you are interested in having your monthly bill automatically drafted from your bank account, please call City Hall to make arrangements (409) 883-3468.

_____ I do not want my home address, telephone number, driver's license number, amounts billed or collected, or other information provided on this application made available to the public upon request.

_____ I understand that as the primary account holder I am responsible for the issued waste container(s). I further understand that at such time I need to discontinue service (whether moving to another residence in West Orange or outside the city) I must complete and sign a form terminating service at this address (and leave container(s) at curbside for pickup by contractor). Otherwise, my account will continue to be billed on a monthly basis and I will be responsible for the balance.

Agreement and Accepted by Applicant

City Employee Witness

Stop Date of Additional Cart(s)

Authorized Signature to Pick up Additional Cart(s)