

Commercial Account Application

Date _____ Business name _____

Service address _____

Phone _____ **(required)** Email _____ **(required)**

Billing address _____ **(required)**

Authorized account contact name _____

Phone _____ **(required)** Email _____ **(required)**

Container Information

Is there currently a dumpster on site? Yes No Dumpster size _____

County-provided containers

Front-load dumpster 3-yard 4-yard 6-yard 8-yard
 Compactor 30-yard

Customer-provided containers (indicate size) Compactor _____ Dumpster _____

Servicing frequency 1 2 3 4 5 6

(Number of days per week; please check one; container options and pricing list available online)

Scheduled collection day(s) – Customers can be serviced up to six times per week; service days will be determined by the commercial collection team and provided to customers.

Prepayment amount \$ _____

*A container delivery and removal fee of \$150 **AND** the equivalent of one monthly service fee **MUST be paid in person** at the Sanitation Division’s administration building, 3720 Leroy Scott Drive, Decatur, Monday through Friday, 9 a.m. through 3 p.m., before container delivery.*

One-time container fee - \$150.00 **Monthly fee** \$ _____

Customer signature _____ **Date** _____

For Office Use Only

Form of payment Cash Card Check Check # _____

Customer # _____ Location # _____ Service day (s) _____

C.C. rep’s signature _____ Date _____

Container delivery date _____ W/O # _____ District _____ Route # _____