



Additional Garbage Can Request

Name: _____ Account Number: _____

Phone Number: _____ Email Address: _____

Service Address: _____

City: _____ State: _____ Zip: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

The above address is requesting _____ additional garbage can(s) at the amount of \$13.00 per month, per can.

I understand that this fee will appear on my monthly billing statement in addition to the \$18.00 monthly charge.

Signature: _____ **Date:** _____

For Office Use Only:

Cart Number: _____ Date Added: _____