

## **Utilities**

## **COMMERCIAL WASTE SERVICES APPLICATION FORM**

Date.				
Name of Business:				
Villages Service Address:				
Federal Tax ID: State Tax ID:				
Contact name and telephone	number:			
Billing address:				
Office contact and telephone	number:			
Email Address:				
Requested delivery date:				
	Number of	6 Yd Dumpster	8 Yd Dumpster	
	Empties Per 1	\$119.95	\$129.95	
	2	\$199.95	\$249.95	
	3	\$299.45	\$369.95	
	4	\$399.95	\$489.95	
	5	\$499.95	\$609.95	
	6	\$599.95	\$729.95	
After completion of registrat your pickup dates. Please no	ote that any obstructi	on to the pickup a	rea will result in trash no	
Make Payments Payable to the A	Appropriate Utility as D	Defined on your billin Terms	ng Service Area	
Rates are currently set by North of the Customer to notify the VC service is requested, and considersonal notification is received	CDD Utility of change umer shall be respons	of occupancy, or ot sible for all service	ther circumstances for which charges incurred to the	ch termination or transfer of date upon which written or
Diaman Duint	Ac	cceptance of Term	s	
Signature of Customer:	Customer Name and		<del></del>	
I hav	re read, understand an	id agree to the term WING FOR VCCDE		
check one) LSSA   Previous Tenant Use Type	□ NSCUDD□ CSU □	Account	Number	
Acceptance/Denial of Application (circle one)	n:	CDD Representative	Date	:
,			ts are non-interest beari	ng
	Pate Paid:			d by: