

Western Kane County Special Service District #1

PO Box 36 Kanab, UT 84741

New Customer Service Agreement

Customer Name: _____

Billing Address: _____

Dumpster Address: _____

Phone Number: _____

Email Address: _____

I wish to receive my bill via email? YES NO

Size	Monthly Rent	Each Lift
6YD Temporary Dumpster	\$20.00	\$30.00

Deposit Collected \$ _____

Dumpster Delivery Date _____

I hear by agree to pay \$ _____ per month per dumpster for the rental of my dumpster(s) and \$ _____ for each lift that I incur. I understand I will be invoiced monthly for these services and that my payment is due within 30 days of the invoice date. If paid after that date, there will be a 18% late fee assessed at a minimum of \$5.00 per month. If payment is received more than 60 days after the invoice date WKCSSD will no longer empty up my dumpster(s). If payment has not been received before 90 days after invoice date WKCSSD will remove all dumpster(s) at my expense and I will incur a \$100 replacement fee per dumpster for them to be returned.

Signature _____

Date _____

Billing Inquiries	Phone #: 435-644-5645 Email: billing@WKCSSD.com
Service/Landfill Information	Phone #: 435-644-5089 Email: danny@WKCSSD.com