



7803 HANFORD-ARMONA RD., HANFORD, CA 93230
PH (559 583-8829 FAX (559) 582-2757

BIN SIZE SELECTION

JOB # _____ BIN # _____

30 YD OPEN TOP 6X8X18
40 YD OPEN TOP 7X8X24
50 YD OPEN TOP 8X8X22

IN COUNTY DEPOSIT - \$300
OUT OF COUNTY DEPOSIT - \$500
CASH CHECK CDL COPY

PRICING:

PULL CHARGE – 1 DELIVERY & 1 EMPTY \$100 EACH TIME
DISPOSAL FEES: \$75 PER TON, GREENWASTE \$40 PER TON

DEPOSITS/PAYMENTS: ARE APPLIED TO THE ACCOUNT AND FEES WILL BE DEDUCTED. JOBS THAT EXCEED THE DEPOSIT MUST BE KEPT IN A PAID STATUS. ANY REMAINING DEPOSIT WILL BE REFUNDED WITHIN 7-10 BUSINESS DAYS. FINAL PAYMENT IS DUE UPON RECEIPT OF STATEMENT _____(INITIAL)

TERMS: YOUR RENTAL PERIOD IS FOURTEEN (14) DAYS BEGINNING ON THE DAY OF DELIVERY. EVERY TIME THE BIN IS PULLED AND RETURNED, THE FOURTEEN DAY PERIOD BEGINS AGAIN. BINS THAT REMAIN INACTIVE AFTER THE FOURTEEN DAY PERIOD WILL BE CHARGED AT THE RATE OF \$25 PER DAY _____(INITIAL)

YOU ARE RESPONSIBLE FOR CONTACTING KWRA WHEN THE BIN IS READY FOR DUMPING OR THE JOB IS DONE. PLEASE CALL (559) 583-8829 TO BE PUT ON THE PICK UP SCHEDULE _____(INITIAL)

YOU ARE NOT TO DISPOSE OF ANY LIQUID WASTE OR HAZARDOUS WASTE. VIOLATION OF KWRA POLICY MAY RESULT IN PENALTIES AND/OR CHARGES FOR DAMAGES ADDED TO YOUR BILL _____(INITIAL)

PROPERTY DAMAGES: KWRA WILL NOT BE RESPONSIBLE FOR DAMAGES TO ANY PROPERTY FROM PLACEMENT OF BIN _____(INITIAL)

I HAVE READ THE ABOVE AGREEMENT. I UNDERSTAND AND AGREE WITH THESE TERMS.

PRINT NAME

SIGNATURE

DATE

BILLING ADDRESS

PHONE NUMBER

CITY

ALTERNATE PHONE NUMBER

BIN LOCATION

DELIVERY NOTES