

NOTE: APPLICATION MUST BE SUBMITTED WITH A COPY OF DRIVERS LICENSE, DEPOSIT, AND FIRST MONTH CHARGE.

Dale County
Department of Solid Waste
Residential Customer Enrollment Information

Account #: _____
(to be filled out by sw clerk)

Container Serial #: _____
(to be filled out by sw clerk)

Delivery Date: _____
(to be filled out by sw clerk)

Type of Structure: _____

Deposit: \$50.00 - Refundable
Monthly: \$18.00

Social Security #: _____

Last Name First Name Middle Initial

Telephone Number Date of Birth Driver's License Number

SERVICE (E911) ADDRESS:		
MAILING ADDRESS:		
CITY:	ST:	ZIP:

RESIDENCE LOCATOR: <i>Please give directions to your home. Please include street names and numbers, as well as any landmarks, in the description that may be helpful. Thank You!</i>

CHARGES AND PAYMENT TERMS

- Garbage fees are assessed per **CONTAINER**. You will be charged for service until your container is returned and the account is officially closed.
- Failure to participate or pay for service is violation of Code of Alabama (1975), Section 22-27-2: therefore is subject to legal action being taken against you in Dale County Circuit Court.

I have read and understand the above charges and payment terms and I do hereby agree to abide by these conditions.

Customer's Signature

Please print and mail to:
Dale County Solid Waste
202 S. Hwy 123, Ste A
Ozark, AL 36360

DALE COUNTY SOLID WASTE MANAGEMENT SOLID WASTE COLLECTIONS AGREEMENT

The undersigned understands and agrees that all charges for goods and/or services rendered are due immediately upon receipt of invoice and shall be considered delinquent upon the expiration of thirty (30) days of invoice. In the event of default in payment, the account will be placed for collection, and the undersigned agrees to pay all costs of collection, including reasonable attorney's fees and costs of court incurred in the collection of same, whether such outstanding balance is satisfied prior to or after initiation of a lawsuit. By signing below, the undersigned affirmatively acknowledges having read the same before signing. Furthermore, the undersigned hereby waives any and all state and federal personal property exemptions, wage exemptions, and homestead exemptions of the undersigned's state of residence and state of operation in the event of judgment, levy, or garnishment.

Signature: _____ Date: _____

Printed Name and Title: _____

SSN: _____ DOB: _____

Address: _____

City, State, Zip: _____

Phone: _____