

**City of Anadarko
Anadarko Public Works Authority
P O Box 647
Anadarko, OK 73005
405-247-2481**

Commercial Dumpster Order Form (2-4-6-8 Yard Containers)

Account Number: _____ Date of Order: _____

Customer(s) Name: _____

Authorized Person Making Request: _____

Service Address: _____

Location of Container on Property: _____

Set Container for New Service:

Current # Yard Container: _____ Change to # Yard Container: _____

Current # of Pickup per Week Currently: _____ Change to # Pickups Per Week: _____

Current Days to Pickup Currently: _____ Change to Days to Pickup: _____

Terminate Service:

Yards: _____ # Pickups per Week: _____ Days to Pickup: _____

Date Container is Scheduled to be Removed from Location: _____

Customer Signature: _____

Utility Billing Department: _____