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: __________________________

Revised August 8, 2013