

Southern Sanitation

P.O. Box 333 • Laredo, Texas 78042  
(956) 723-3333 • Fax (956) 723-7775

SERVICE AGREEMENT  
Non-Hazardous Waste

Customer Acct No. \_\_\_\_\_

Effective Date\_\_\_\_\_

Account Name \_\_\_\_\_

Service Address \_\_\_\_\_

City, ST, Zip \_\_\_\_\_

Telephone:\_\_\_\_\_ Fax:\_\_\_\_\_

Contact: \_\_\_\_\_

Billing Name \_\_\_\_\_

Billing Address\_\_\_\_\_

City \_\_\_\_\_ State\_\_\_\_\_ Zip \_\_\_\_\_

Telephone:\_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

EQUIPMENT AND SERVICE

Quantity	Size	Frequency	Scheduled Pickup Days					
			___Mon.	___Tues.	___Wed.	___Thurs.	___Fri.	___Sat.
			___Mon.	___Tues.	___Wed.	___Thurs.	___Fri.	___Sat.
			___Mon.	___Tues.	___Wed.	___Thurs.	___Fri.	___Sat.

SPECIAL INSTRUCTIONS:

THE UNDERSIGNED INDIVIDUAL SIGNING THIS AGREEMENT ON BEHALF OF CUSTOMER, ACKNOWLEDGES THAT HE/SHE HAS READ AND UNDERSTANDS THE TERMS OF THIS AGREEMENT ON REVERSE SIDE AND THAT HE/ SHE HAS THE AUTHORITY TO SIGN ON BEHALF OF CUSTOMER.

CUSTOMER

(Authorized Signature) \_\_\_\_\_

Name (Print) \_\_\_\_\_

Title \_\_\_\_\_

Address \_\_\_\_\_

TDL # \_\_\_\_\_ Date \_\_\_\_\_

TIN: \_\_\_\_\_

SERVICE CHARGES

Service Charge per Month \$ \_\_\_\_\_

Landfill Charge \$ \_\_\_\_\_

Extra Pickup Charge \$ \_\_\_\_\_

Fuel Surcharge \$ \_\_\_\_\_

Delivery Fee \$ \_\_\_\_\_

All service charges are plus tax: 8.25% + \$1.00/ton administration fee

SOUTHERN SANITATION

(Authorized Signature) \_\_\_\_\_

Name (Print) \_\_\_\_\_

Date \_\_\_\_\_