

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: \$14.00

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: *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!*

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