



For Office Use Only		
Enter Customer	Trash Can	
Create Invoice	Scan	
Make Payment	File	
Put on Route	Inform Customer	
Memorize	Enter ACH	

P.O. Box 3611
 Victoria, Texas 77903
 361-550-1826

Dumpster Form

Note: All personal information is held securely in accordance with the appropriate legislation, is confidential and treated appropriately.

Client Information

Company _____ Date _____

Billing Address _____
 Street/PO Box City State Zip

Dumpster Address _____
 Street City State Zip

Contact Person _____ County _____

Work _____

Cell _____

Email _____

Invoice delivery (check one) e-mail _____ US Mail _____

Dumpster Size: ___ 2 YD ___ 4 YD ___ 6 YD ___ 8 YD (slant or flat top)

Driver referral _____ Service Start Date _____

Guidelines:

1. Holiday schedule –New Year’s Day, Thanksgiving and Christmas Day. We will shift the schedule one day later on holiday weeks.
2. We ask that the dumpster access be open on normal trash pickup days.
3. Extra trash outside of the dumpster may be picked up by our driver. Additional charges may be incurred. This will be determined on a case by case basis.
4. Prohibited items: petroleum based and synthetic oil, paint, tires, any kind of pressurized containers such as aerosol cans, propane tanks, helium tanks, and dead people (wife, ex-wife, husband, ex-husband, in-laws, etc.)



WHITE TRASH SERVICES
Your Low-Cost Trash Picker-Upper!

P.O. Box 3611
Victoria, Texas 77903
361-550-1826

Recurring Payment Authorization Form

Schedule your payment to be automatically deducted from your bank account. Just complete and sign this form to get started!

Recurring Payments Will Make Your Life Easier:

- It's convenient (saving you time and postage)
- Your payment is always on time (even if you're out of town), eliminating late charges

Here's How Recurring Payments Work:

You authorize regularly scheduled charges to your checking/savings account. You will be charged the amount indicated below each billing period. A receipt for each payment will be emailed to you and the charge will appear on your bank statement as an "ACH Debit." You agree that no prior-notification will be provided unless the date or amount changes, in which case you will receive notice from us at least 10 days prior to the payment being collected.

Please complete the information below:

I _____ authorize White Trash Services to charge my bank account
(full name)

indicated below for \$_____ on the 10th day of the month for payment of my trash collection.

Billing Address _____ Phone# _____

City, State, Zip _____ Email _____

Checking/ Savings Account

Checking Savings

Name on Acct _____ Bank Name _____

Account Number _____



Bank Routing # _____

Bank City/State _____

SIGNATURE _____

DATE _____

I understand that this authorization will remain in effect until I cancel it in writing, and I agree to notify White Trash Services in writing of any changes in my account information or termination of this authorization at least 15 days prior to the next billing date. If the above noted payment dates fall on a weekend or holiday, I understand that the payments may be executed on the next business day. For ACH debits to my checking/savings account, I understand that because these are electronic transactions, these funds may be withdrawn from my account as soon as the above noted periodic transaction dates. In the case of an ACH Transaction being rejected for Non Sufficient Funds (NSF) I understand that White Trash Services may at its discretion attempt to process the charge again within 30 days, and agree to an additional \$25.00 charge for each attempt returned NSF which will be initiated as a separate transaction from the authorized recurring payment. I acknowledge that the origination of ACH transactions to my account must comply with the provisions of U.S. law. I certify that I am an authorized user of this bank account and will not dispute these scheduled transactions with my bank; so long as the transactions correspond to the terms indicated in this authorization form.