



**City of East Bernard
Application for Trash Service**

Name: _____

Mailing Address: _____

Email: _____ Phone: _____

Location Address: _____

Do you own or rent? _____ Landlord's Name: _____

Landlord's Address: _____

Landlord's Phone: _____

New Service Deposit: \$117.00 cash or personal check. (Pays for can and first month of service)

Payment Date: Payment is due on the 15th of each month

Late Fee: A late fee charge of \$10.00 will be added on the 16th to any unpaid balance

On-Line Bill Pay: Log on to www.eastbernardtx.com to set up an online bill pay account

Alternate Payment Methods: Cash, Check, Money Order, or Credit Card

Cancellation of Trash Service

Cancellations *must be done in writing and submitted to City Hall* with payment for any remaining balance. Signer is responsible for any charges that accrue until service is cancelled.

By signing below, I acknowledge that I understand and agree to all of the above terms, as outlined.

Signature: _____ Date: _____

******REPOSSESSION******

A repossession fee in the amount of **\$144.00** (\$117.00 + an additional month) will be added to your account
*****To restore service, you must pay the repossession fee plus your past due balance.*****

By signing below I acknowledge that I understand and agree to these terms, as outlined.

Signature: _____ Date: _____

FOR OFFICE USE ONLY

65 or Older Verification:

DOB: _____

City Staff

Make copy of ID and paste here