

# Garbage and Trash Rate Schedule

**Business Name:**

**Contact Person:**

**Phone No.:**

**Type of Service Offered:**

(example: household garbage, yard waste, bundled materials, etc.)

**Items NOT Accepted:**

(example: yard waste, building material scraps, etc.)

**Size, Type and Number of Receptacles Accepted per Pick-up**

(example: eight 33-gal. bags, five 39-gal. garbage cans, etc.)

**Charges and Frequency (per bag, per can, for # of bags/cans, etc.)**

(ex. \$20 up to 8 bags, once per week; \$30 up to 5 cans, twice per month, etc.)

**PICKUP DAY(S)/ESTIMATED TIME:** (example: Friday 7:00am, etc.)

**Service Charge for Receptacles over Limit**

(example \$1 per bag over limit, or \$1 per can over limit, etc.)

**Additional Requirements-Limits-Fees (if applicable)**

**Holidays Observed:**