



Escambia County Waste Services

13009 Beulah Road
Cantonment, Florida 32533-8831
Phone: 850.937.2175
Fax: 850.937.2152



Payment Account

DATE: _____ ACCOUNT NO: _____

Account Name: _____

Federal Employer Identification Number (FEIN): _____

Escambia County Solid Waste Management Permit No.: _____

Owner/President: _____

Street Address: _____

City/State/Zip: _____ Phone with area code: _____

Mailing Address: _____

Contact Person: _____ Phone with area code: _____

<u>VEHICLE NUMBER</u>	<u>CY CAPACITY</u>	<u>TYPE OF VEHICLE</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

My account will be charged the appropriate rate as approved by the Board of County Commissioners.

Type of material disposing: _____

Number of loads estimated on a monthly basis: _____

Estimated tonnage for one month: _____

Method of security deposit: _____

Escrow is one month tonnage x 2x current tipping fee / ton = Escrow

Escrow can be cash, check, irrevocable letter of credit from your bank or a surety bond.

FOR DEPARTMENT OF SOLID WASTE MANAGEMENT'S USE ONLY

Estimated tonnage for two months: _____

Amount of security deposit required: _____

Accounting Supervisor: _____

Date: _____

Signature