



Waste Removal, LLC

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Location: 2600 NC Hwy 101, Beaufort, NC 28516
Mailing Address: PO Box 175, Morehead City, NC 28557

Residential Agreement

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Home/Cell Phone: _____ Email: _____

Employer Name: _____ Work Phone: _____

Driver's License #: _____

Billing Information

Business Name: _____ Federal Id No: _____

Service Address: _____
Mailing Address: _____

Do you own this property? YES NO*

*If this is a rental home, please list landlord's name and phone number below:

Landlord/Manager Name: _____ Phone Number: _____

Agreement and Signature

Residential trash billing is due the month prior to the billing quarter (Jan-Mar; Apr-June; Jul-Sept; Oct-Dec). Quarterly billing pricing: _____. Billing is considered past due if not paid by the 25th of the month from invoice date. Service will be discontinued on past due accounts and a final dump fee may be applied.

Signature: _____ Date: _____

Warning/Loading Instructions: Container is not to be loaded with hazardous, toxic, flammable liquids, solids, or gases. All containers must be loaded below the top. All materials that are loaded above the top will be dumped off. Customer agrees to the service performed above.

For Office Use Only: Toter # _____