

Waste Collection Request Form

Date _____ Account No.: _____

Customer Name _____

Service Address _____

Telephone # _____ Alt. # _____

Collection Day (circle one) Monday Wednesday Thursday Friday

Under Section 10-35 (h) of the Crete Municipal Code a customer may stop trash collection service for reasons of vacation or moving. The service must be stopped for a period of 30 days or more. Credit will be given for unused service in whole month increments.

Please stop waste collection service for the following reason:

➤ **Vacation** - Stop Date _____ Start Date _____

➤ **Moving** - Stop Date _____

➤ **Forwarding Address (if applicable)** -

I, the undersigned, affirm that I am the customer as listed above and agree that no waste will be generated during the time stated above. If waste is picked up at the above address at any time during this request, I understand I will be billed for that entire month of service.

Customer Signature