



Trash Collection/Recycling Service Enrollment Form

** Do not cancel current service until notified by WCID#17 of your start date.

**This program is for trash and recycling combined as a single price. You may elect to only participate in one service, but you will be billed the same for one or both services.

Travis County WCID 17 Applicant Information:

Name of account holder: Last, First, Middle Initial

Utility Account Number

Utility Service Address

Daytime Telephone Number

Mailing Address

Email Address

City / State / Zip

Please Check Applicable:

Cans needed:

- | | |
|---|--|
| <input type="checkbox"/> Both trash and recycling carts | <input type="checkbox"/> additional 96-gallon trash cart, \$7.70 per month |
| <input type="checkbox"/> 65-gallon recycling cart only | <input type="checkbox"/> additional 65-gallon recycling cart, \$4.40 per month |
| <input type="checkbox"/> 96-gallon trash cart only | <input type="checkbox"/> none, have both cans from Progressive already |

Signature Section: I hereby authorize Travis County WCID 17 to initiate trash collection service for the service address listed above. I agree to pay directly to Travis County WCID 17 the monthly fee (\$18.00) and sales tax for the provision of this service. I understand that WCID 17 has the right to discontinue the trash collection service for this address if the fees for trash service are not paid as part of the monthly water bill. This authority shall remain in full force and effect until revoked by me or Travis County WCID 17.

Account Holder's Signature for Authorization

Date

Please allow 7 to 10 business days for completion of your enrollment request. WCID 17 will notify you by mail and/or email of the specific start date of trash service. At that time, you will be instructed to cancel service with your current trash provider.

**Mail to: Travis County WCID 17 - Trash Collection Program
3812 Eck Lane
Austin, TX 78734**

Fax to: (512) 266 - 2790

E-mail to: ewall@wcid17.org

Phone: (512) 266-1111 x116

'Internal Use: _____ Site Number _____ Service Day _____ Notified