



# Trash Collection/Recycling Service Enrollment Form

**\*\*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.**

**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