

COMMUNITY ASSOCIATION SOLID WASTE BILLING

Neighborhood:		Type of Community:	
-		<u> </u>	condo, duplex, townhomes,
Association Name:			mobile home, single family
Billing Address:	Street Address	Number of parcels: (total should agree	
_			to page 2)
	City, State, Zip		
Primary Contact Name:		Secondary Contact Name:	
Contact Affiliation to		Contact Affiliation to	
Association:		Association:	
Management Company:		Management Company:	
Phone Number:		Phone Number:	
Number of Dumpsters:		<u> </u>	
Dumpster Location:		Size & Frequency	
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	APPLICAN*	T AGREEMENT	
_	ned, as a principle of the Home Owner es to be billed to one entity for all pro		
The undersign	ned agrees to comply with and be bou	and by all rules and regulations and	d ordinances of the City of New
Port Richey in	respect to Solid Waste Services provi	ided and specifically as follows:	
1. To	pay for services provided by the services	ce provider and hilled by the City of	of New Port Richey within thirty
	of the invoice date.		or new rote money within thinty
	ee to pay a penalty not to exceed 8%		
	he event of a dishonored check, paym	·	_
	ralue, whichever is greater, must be medice. City reserves the right to bill each reserves.		
	lection fees subject to said agreemen		
5. Agr	ees to submit a new agreement if cha	inges in community association, th	ne management company, or
	ormation changes occur.		
	ms of agreement are limited to one ca	alendar year and expire on Decem	ber 31st and are requried to be
	annually by December 15th.	you recult in logal proceedings to a	unforce the rights of the City of
New Port	 Failure to comply with this agreement, may result in legal proceedings to enforce the rights of the City of New Port Richey to collect such fees. In any such proceedings, the City shall be entitled to recoup its costs and fees, including attorney's fees. 		
rees, men			
Customore Signature		Data.	
customers signature		Date	