

Please mail checks & money orders to the address below

Walker County Solid Waste

1803 3rd Ave S, Suite 108 Jasper, AL 35501

Office: (205) 384-7253 Landfill: (205) 829-3830 Email: s.king@walkercountyal.us

Name _____

Mailing Address _____ City _____ State _____ Zip _____

Physical Address _____ City _____ State AL Zip _____

Home Phone (____) _____ (if different)
2nd # (____) _____ Email _____

Driver License No. _____ State _____ Date of Birth _____

Residential (1 Can) Rates: Quarterly- \$67.00 Semi-Annually- \$134.00 Yearly- \$268.00

*** A \$50.00 can deposit is required at sign up to start service (Total: \$117.00) ***

- Garbage pickup is once a week and should contain only household garbage.
- Remember to bag and tie garbage before placing in container(s).
- Place the container(s) at the end of your drive by 6a.m. on pick up day.
- Sanitation drivers are not allowed to accept payments.
- Please inform us of any address, phone, or service changes.
- Holiday schedules are posted in the local newspaper and available on our face book page and WalkerCountyAl.com.
- We service only one household per container(s). No sharing of service.
- Resident is responsible for the loss or damage to container(s).
- Rates and fees are subject to change.
- Customer must notify County two weeks before customer wants service terminated and container removed.
- Billing for services is at the end of each quarter (unless paid yearly). This may be paid via mail with a check or money order.
Cash payments should be made at the Solid Waste Office. (All payment methods are accepted at the Solid Waste Office)
- Service will be discontinued if payment has not been received by due date. Customer is legally responsible for all past due payments and cost of collection and for any service rendered after due date for failing to notify County to discontinue service.
- Service will be discontinued if payment is returned dishonored and subject to a \$30.00 return item fee.
- To reinstate a discontinued service the following conditions must be met.
 - a. Delinquent balance must be paid in full.
 - b. Current balance of service must be paid in advance.
 - c. \$50.00 delivery fee if container has been picked up by Solid Waste Department. This fee may be waived if resident picks up container(s).

I, legal resident of the address above, agree to the terms and conditions of service stated and hereby request to be supplies ____ containers.

Name _____ Date _____
(Signature)

Staff Use: Container(s) Number(s) _____

Account Number _____ Date Delivered _____ Staff Opening Account _____

*** Please contact the office for additional container rates ***

Note: Each additional can requires a \$50.00 can deposit