

**CHARGE ACCOUNT APPLICATION**

**BUSINESS NAME:** \_\_\_\_\_ **BUSINESS LICENSE #** \_\_\_\_\_

**OWNER:** \_\_\_\_\_ **CONTRACTOR #** \_\_\_\_\_

**PHONE:** \_\_\_\_\_ **FAX:** \_\_\_\_\_

**E-MAIL:** \_\_\_\_\_

**BILLING ADDRESS:** \_\_\_\_\_

**CONTACT PERSON(S):** \_\_\_\_\_

**VEHICLE LICENSE # & BRIEF DESCRIPTION:**

<b>STATE</b>	<b>LICENSE #</b>	<b>DESCRIPTION</b>
<b>Example: WA</b>	<b>B00123A</b>	<b>BLUE TOYOTA PICKUP</b>

**PERSONS AUTHORIZED TO CHG TO THIS ACCOUNT  
NAMES:**

\_\_\_\_\_

\_\_\_\_\_

**NAME AND PHONE NUMBER OF THREE CREDITORS**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**ASOTIN COUNTY REGIONAL LANDFILL  
2901 6TH AVENUE, CLARKSTON, WA 994043**

**PHONE 509-758-9230**

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**PRINT NAME**

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**SIGNATURE**

**PLEASE DROP OFF APPLICATION AT THE LANDFILL OR MAIL BACK ORIGINAL.**

**DO NOT WRITE BELOW THIS LINE**

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**APPROVED**       **DENIED**      **ACCT CODE** \_\_\_\_\_

**DATE:** \_\_\_\_\_

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**SOLID WASTE SUPERVISOR**

### **ASOTIN COUNTY REGIONAL LANDFILL CHARGE ACCOUNT AGREEMENT**

This agreement is between the Asotin County Regional Landfill, a non-profit entity, as creditor, and YOU the charge account holder.

All charge accounts are identified by vehicle license plate number. It is important that you notify the landfill if a new vehicle is to be added or an old vehicle needs to be deleted from the account.

Receipts are printed for each load. Receipts are the customer's responsibility. Statements are sent monthly. Payments are due the 25<sup>th</sup> of each month. Accounts over 30 days past due are charged interest of 1.5% on the past due amount. In the event your account remains past due and no arrangements have been made with the landfill for payment, your account will be turned over to the Asotin County Prosecuting Attorney for further action. The interest will continue to accrue and your business will be on a cash only basis until the account balance is paid in full. If you have questions, please call the landfill at (509) 758-9230.