

City of Windcrest 8601Midcrown Dr. Windcrest, TX 78239 210-655-0022 mguel@windcrest-tx.gov

APPLICATION AND AGREEMENT FOR CITY OF WINDCREST GARBAGE/RECYCLING SERVICE

APPLICANT/S (must provide copy of Driver License):	
Closing/Rental date	
Name:	Phone#:
Service Address:	
Mailing Address:	
E-mail Address:	
Phone #:	
Social security#:	
Driver's license #:	
AGREEMENT FOR SERVICES FROM THE CITY OF WINDCRESTS	: (initial each line)
I hereby agree to the following conditions:	
 I agree to pay the bill by the due date or a late fee will be add I agree to terminate garbage services upon moving out of th I agree that if I do not receive a bill by mail or email that the Utility Billing office and determine the amount of my I agree that if I default on any of the above agreements, the the account into nonpayment status and suspend the service Ordinance. An extra service fee of \$25 will be applied to get 	e residence. It is my responsibility to call or come to bill. City of Windcrest has the right to put ce until the account is paid in full per City
ENFORCEMENT: IF THE CUSTOMER FAILS TO COMPLY WITH THE TER GARBAGE SERVICES SHALL BE TERMINATED. THE CITY OF WINDCRE GARBAGE ACCOUNT IF PAYMENT IS DELINQUENT. THE CUSTOMER SI WITH THE ENFORCEMENT OF THIS AGREEMENT.	ST HAS THE RIGHT TO SUSPEND THE
Primary Applicant Signature	Date
OFFICE USE ONLY	
Account Number:	