



City of Windcrest
8601 Midcrown Dr.
Windcrest, TX 78239

210-655-0022 X 1053
utilities@windcrest-tx.gov

APPLICATION AND AGREEMENT FOR RESIDENTIAL GARBAGE/RECYCLING SERVICE

APPLICANT/S (must provide copy of Driver License):

Name: _____ Phone#: _____

Service Address: _____

Mailing Address: _____

E-mail Address: _____

Driver's license #: _____

Indicate: New Home Owner /Closing Date _____ Renter/ Rental Date _____

AGREEMENT FOR SERVICES FROM THE CITY OF WINDCREST: (initial each line)

I hereby agree to the following conditions:

1. _____ I agree to pay the bill by the due date or a late fee will be added to the account.
2. _____ I agree to terminate garbage services upon moving out of the residence.
3. _____ I agree that if I **do not** receive a bill by mail or email that it is **my responsibility** to call or come to the Utility Billing office and determine the amount of my bill.
4. _____ I agree that if I default on any of the above agreements, the City of Windcrest has the right to put the account into nonpayment status and suspend the service until the account is paid in full per City Ordinance. An extra service fee of \$25 will be applied to get account reactivated.

ENFORCEMENT: IF THE CUSTOMER FAILS TO COMPLY WITH THE TERMS OF THIS SERVICE AGREEMENT, THE GARBAGE SERVICES SHALL BE TERMINATED. THE CITY OF WINDCREST HAS THE RIGHT TO SUSPEND THE GARBAGE ACCOUNT IF PAYMENT IS DELINQUENT. THE CUSTOMER SHALL PAY ANY EXPENSES ASSOCIATED WITH THE ENFORCEMENT OF THIS AGREEMENT.

_____ Primary Applicant Signature _____ Date _____

OFFICE USE ONLY

Account Number: _____