



of Totes \$ to be added Date Delivered ACCOUNT

City of Seadrift Solid Waste

SSW Working to Keep Our City Clean



Post Office Box 159 Seadrift, Texas 77983 (361) 785-2218 Tel:

Fax: (361) 785-2208 Incorporated December 27, 1912 START DATE

EXTRA TOTE AGREEMENT Residential/Small Business

Monthly Billing

Rates:

Tier 1 - Residential - Monthly Rate is \$26.00 for one Tote Tier 2 - Residential/Small Business - Monthly Rate is \$30.00 for one Tote

Extra/Additional Totes - \$7.00 each, monthly

Definitions Summary:

Tier 1 - Residential - A single family residential dwelling located INSIDE the City Limits served by one water meter or also having at most one additional, small rental unit co-located on the same lot and served by the water meter for the main, family residential dwelling.

Tier 2 - Residential/Small Business - (a) A single family residential dwelling located OUTSIDE the City Limits served by one water meter OR also having at most one additional, small rental unit co-located on the same lot and served by the water meter for the main, family residential dwelling. (b) A motel/apartment complex located INSIDE the City Limits consisting of 4 or fewer units (including office space) served by one water meter OR unless otherwise determined by the City (see section 1.27(g) of SSW Guideline for exceptions permitted). (c) A small business located INSIDE the City Limits that will generate NO MORE than one Tote of solid waste weekly.

The City shall be the sole arbiter in determining class of service and/or number of Totes

One (1) Tote is allowed for each water meter. Extra Totes may be requested by written request/agreement. Switching back and forth between multiple Totes back to One Tote and then later back to multiple Totes is not allowed.

AGREEMENT FOR ADDITIONAL TOTES I, _____, understand that I have been allotted one (1) Tote per water meter and,

having read and understand the abo	ve information, make a request for	additional Tote(s) to
be delivered to	and added to my monthly utility b	illing at the rate of \$6.50
each per Month. I understand I am pe	ermitted to make a request reducing the	number of totes from this
request once each fiscal year (Octo	ober 1 st through September 30 th). I furth	er understand that I can
make a request to increase the num	ber of additional totes, at any time, unde	erstanding the restriction
on number of reductions in a fiscal y	ear. I currently have City Tote(s) at	the address above and I
will not transport City Totes to ano	ther location. I further understand that	upon cancelation of my
account or a request to reduce numb	per of City Totes the City will pick up the T	otes and if missing I may
be liable for the cost of the lost/mispl	aced City Tote.	
AGREED TO AND SIGNED	THIS THE DAY OF	,
Signature		
TOTE REMOVAL REQUEST: I	, request remo	
the above address.	, request remo	Total of Total Holli
Signature	Date	