



711 W Cinnamon Drive • Lemoore, California 93245 • (559) 924-6744 x 715 • Fax (559) 924-9003
Finance Department

DECLARATION

The undersigned applicant for the purpose of requesting the use of an additional automated refuse container under Chapter 1, Section 4-1-6(A) of the Lemoore Municipal Code and Resolution 2020-07 represents as follows:

Account # _____

Name:(print): _____ Phone: _____

I reside at _____, in the City of Lemoore. I am requesting the use of an additional container. I understand that I must be established with refuse service at this time and that rates will be billed on a month to month basis and no credit or adjustments will be made for partial month usage.

_____	Extra Black Refuse Container	\$10.93/month
_____	Second Green Waste Container	No Cost
_____	Third or More Green Waste Container	\$3.28/month
_____	Second Blue Recycling Container	No Cost
_____	Third or More Blue Recycling Container	\$2.19/month

I understand that I will assume responsibility for this can. I must surrender this can at the cancellation of utility service or pay a \$48 replacement fee per can. **Please note: If a can is returned and service resumed within one-year, there will be a \$24 delivery fee.**

Signature

Date

For office use only

Extra Container(s) entered into billing system: Date: _____ Employee _____

Container(s) delivered: Date: _____ Employee _____

Container No: Blue _____ Green _____ Black _____

Deliver to the Utility Office 711 W. Cinnamon Dr.