



*Authorization for 2<sup>nd</sup> Waste Management Container*

*Date* \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

*Name* \_\_\_\_\_

*Address* \_\_\_\_\_

*I, \_\_\_\_\_, authorize the City of Boerne to deliver a trash container provided by Waste Management for the cost of \$7.64, including tax, to be billed to my utility account monthly. If I wish to have the container removed at any time, I will contact the City of Boerne Utility Customer Service Office at (830)249-9511 to request the removal of the container and the additional fee.*

*Signature* \_\_\_\_\_

*Date* \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

*Office use only: Received by: \_\_\_\_\_ Date: \_\_\_\_\_ Acct# \_\_\_\_\_ S/O# \_\_\_\_\_*