



City of Eloy Commercial Account Pick Ups Per Week

624 North Main Street, Eloy, AZ 85131

(520) 464-3401 Phone

(520) 466-3760 Fax

Please complete with the requested information indicating any changes to commercial trash service and return this form to the Finance Department. Thank you for your assistance.

Name: _____ Phone #: _____

Service _____ Mailing _____

Address: _____ Address: _____

Account #: _____ Email: _____

Select size(s) of container(s) currently on-site:

<input type="checkbox"/>	90 gallon	<input type="checkbox"/>	2 yard	<input type="checkbox"/>	6 yard
<input type="checkbox"/>	300 gallon	<input type="checkbox"/>	3 yard	<input type="checkbox"/>	8 yard
<input type="checkbox"/>	450 gallon	<input type="checkbox"/>	4 yard	<input type="checkbox"/>	

Select new size(s) of container(s):

<input type="checkbox"/>	90 gallon *only one pickup per week available	<input type="checkbox"/>	4 yard
<input type="checkbox"/>	2 yard	<input type="checkbox"/>	6 yard
<input type="checkbox"/>	3 yard	<input type="checkbox"/>	8 yard

Select number of pickups per week:

<input type="checkbox"/>	one pickup per week	<input type="checkbox"/>	two pickups per week
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Above-requested changes are authorized for this account.

Signature

Title of signer

Print name

Date