



**Solid Waste and Recycling**  
Physical Address: 1088 Cemetery Rd  
Mailing Address: 150 Courthouse Dr  
Driggs, ID 83422  
Phone: 208-354-3442 Fax: 208-354-3442

# COMMERCIAL ACCOUNT APPLICATION

**\*\*NEW ACCOUNTS MAY NOT BE IMMEDIATELY AVAILABLE FOR USE ON THE DAY PAPERWORK IS TURNED IN\*\***

**A \$20.00 NON-REFUNDABLE APPLICATION FEE MUST BE SUBMITTED WITH THE APPLICATION**

Company Name: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Current Mailing address: \_\_\_\_\_

City \_\_\_\_\_ State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_

Preferred Billing Method: Mail: \_\_\_\_\_ Email: \_\_\_\_\_ Email Address: \_\_\_\_\_

**ALL ACCOUNT USERS MUST HAVE THE PASSWORD IN ORDER TO USE THIS ACCOUNT**

Account Password: \_\_\_\_\_

## CREDIT TERMS AND CONDITIONS

- **THE APPLICATION FEE AND A BUSINESS CARD MUST BE SUBMITTED WITH THIS APPLICATION.**
- **For the purpose of establishing and maintaining credit, the statements and information provided in and with this application are full, true and correct.**
- **Applicant agrees to pay all charges by the 30<sup>th</sup> of the month following the month's disposal.**
- **If a credit customer establishes a routine of slow payment, nonpayment on past due invoices, the account may be shut off and may not be reinstated to charge statue. Account needs to be brought current by cash or check payment in full amount. Solid Waste Supervisor will determine whether account will be reinstated once suspension has accrued.**
- **Applicant agrees to pay all cost of collection, including reasonable attorney fees, in the event Applicant fails to pay.**
- **A \$5.00 late fee will be charged on all accounts not paid**

Applicants wishing to apply for Commercial Account with Teton County Solid Waste Facility in accordance with these terms, and conditions, which have been read, understood and accepted. The undersigned is an **officer or owner** of Applicant and is authorized to represent and binds Applicant with respect to these matters.

Print Name: \_\_\_\_\_

Title: \_\_\_\_\_

Signature : \_\_\_\_\_

Date: \_\_\_\_\_

### FOR COUNTY USE ONLY:

Application approved by: \_\_\_\_\_

Date: \_\_\_\_\_

Fees paid: \_\_\_\_\_ Check # \_\_\_\_\_ Cash \_\_\_\_\_