

Advance Disposal Company & Recycling Center

AUTO-DRAFT APPLICATION

Customer ID # _____

Customer Name: _____

Service Address: _____

Advance Disposal Co. has established the following guidelines for customers choosing to use our auto-draft program. Please read the following carefully, sign and return requested information.

1. You will still receive a billing statement.
2. Refuse payments will be drafted from customer's accounts at the time of billing, with the exception holidays, weekends, or other unexpected events. Amount due will be drafted.
3. Changes in customer Banking information will require the completion of a new authorization form.
4. In the event your account cannot be debited due to insufficient funds, the customer will be responsible for any fees that may occur.
5. Cancelling the auto-draft must be done in writing, allowing five business days.
6. You may see **Best Way Disposal** on your banking statements.

Billing information:

I have enclosed a voided check from the designated account.

I would like **my** credit card listed below used for auto-draft:

Cardholder Name _____

Billing address for card _____

Card Type:
(i.e. Visa, MasterCard) _____ Card # _____ Exp. Date _____

Signing below is an authorization and agreement for the auto-draft terms.

Signed _____ Date _____