



**SERVICE AGREEMENT**  
**DEL RIO LANDFILL SELF-HAULERS**  
**109 W. Broadway St.**  
**(830) 774-8504**  
**FAX (830) 778-2062**

BUSINESS NAME: \_\_\_\_\_

CONTACT PERSON: \_\_\_\_\_

CONTACT PHONE #: \_\_\_\_\_ FAX PHONE #: \_\_\_\_\_

BILLING ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

EMAIL: \_\_\_\_\_

AUTHORIZED SIGNATURE: \_\_\_\_\_ TIN/EIN: \_\_\_\_\_

PRINT NAME: \_\_\_\_\_

TITLE: \_\_\_\_\_

DATE: \_\_\_\_\_

*For City Use Only*

LANDFILL ACCOUNT ID #: \_\_\_\_\_