



**ARCATA GARBAGE, INC**

30 SOUTH G ST, ARCATA, CA 95521-6692  
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**CITY ONE-TIME OR SHORT TERM BIN RENTAL AGREEMENT  
7/1/16-6/30/17**

**ALL BINS MUST BE PRE-PAID, WITH AT LEAST ONE DAY NOTICE.**

SIZE	WEIGHT	DIMENSIONS	GARBAGE FEE
5 YD	.5 ton/1,000 lb. max.	about 6'X6'X5' tall	\$ 184.51
18 YD	1.8 ton/3,600 lb.	about 16'X8'X4.5' tall	\$ 590.37
1/2 18 YD	.91 ton/1,800 lb.	about 16'X8'X4.5' tall	\$ 295.19
30 YD	3.0 tons/6000 lb.	about 20'X8'X4.5' tall	\$ 943.10

These prices include the use of the bin for 3 working days and one empty. The 18 yd. bin will hold up to 10 tons. **Extra weight in the 18yd & 30yd bins will be charged at \$129.01/ton** for the garbage fee. Weight must be distributed evenly in the bin. Bin should not be filled above the rim. Bin should be tarped in wet weather as we do not deduct for water weight. Additional empties of the bin will require the pre-payment fee as well as additional weight fees if they apply. Additional fees may apply for appliances (\$20.00 & up/appliance), or if bin is left longer than 3 working days (\$35.61/day) and will be billed after empty of bin.

**Absolutely NO Hazardous Waste:** No paints, chemicals, TV's, computer monitors, e-waste, florescent bulbs, tires, pressure treated wood, etc. Any hazardous materials found in the container and clean-up costs will be billed to customer. See back of page for listing of some common hazardous materials and where to properly dispose of them.

If Arcata Garbage is unable to deliver, pick up, or service the bin due to circumstances beyond our control (road conditions, power lines, access blocked by other vehicles or objects, etc.) customer will be charged a Labor Charge (\$57.50/hour) & Mileage Charge (\$5.05/mile), minimum charge of 1 hour & round trip from shop to destination.

**Arcata Garbage will not be liable for any damage to road surface, water lines, sewer lines, power lines, phone lines, cable lines, septic systems, etc., caused by truck or bin.**

ACCT# \_\_\_\_\_ BILLING NAME/ADDRESS \_\_\_\_\_

SERVICE ADDRESS \_\_\_\_\_ PLACEMENT \_\_\_\_\_

PHONE NUMBERS (Billing) \_\_\_\_\_ (Service) \_\_\_\_\_ EMAIL \_\_\_\_\_

DL, SS, BUS LIC, OR TAX ID \_\_\_\_\_ EXP: \_\_\_\_\_ LAST 4 SSN# \_\_\_\_\_

BIN TYPE \_\_\_\_\_ DELIVERY DATE \_\_\_\_\_ BIN FEE \$ \_\_\_\_\_

NOTES ETC. \_\_\_\_\_

I have read the above information and agree to the terms and charges.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_/\_\_\_\_/\_\_\_\_