



CITY OF ALGOOD

108 E Main St | PO Box 49215 | Algood, TN 38506
Office: 931.537.9545 | Fax: 931.537-9429



REQUEST FOR DUMPSTER PICKUP SERVICE

Company Name: _____

Contact Name: _____

Phone No. _____

Account No. _____

Service Address: _____

Apt. _____

City _____

Zip _____

Billing Address: _____

(if different from service address)

Apt. _____

City _____

Zip _____

Please select your Dumpster Plan:

Dumpster Rented

\$40.00 Monthly Fee

Dumpster Owned

\$12.00 Fee per pickup

Dumpster Rent & Pickup

\$40.00 Monthly Fee + Number
of Pickups Scheduled

Pickup Schedule Requested: (please check one)

Monday

Wednesday

Friday

Will phone in dates

REC'D BY: _____ DATE REC'D: _____ Service Order # _____ Account # _____