

**AGREEMENT TO CHARGE AT PHILLIPS COUNTY LANDFILL**

This agreement made and entered into on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by and between PHILLIPS COUNTY, COLORADO, acting by and through the Board of County Commissioners, 221 South Interocean Avenue, Holyoke, Colorado 80734. Hereinafter referred to as “County”, and

\_\_\_\_\_ and or \_\_\_\_\_

Name

Business

Mailing Address

City, State, Zip Code

(\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  
Telephone

Hereinafter referred to as “Customer”.

“Customer” hereby agrees to pay to the county all charges made at the Phillips County Landfill any given month by the 20<sup>th</sup> day of the following month.

In the Event “Customer” is in default in payment of charges, the County may suspend “Customer’s” use of Phillips County Landfill. Any returned check is considered as default in payment. Any costs to collect delinquent charges will be paid by “Customer”.

**EFFECTIVE: January 1, 2018 – The fee for landfill clients who charge and do not pay when payment is due will be charged a minimum of \$10 or 2% per month, whichever is greater.**

“Customer” hereby has read and agrees to the above terms.

\_\_\_\_\_  
Customer

\_\_\_\_\_  
Date

Name:

Address:

1. Would you like to receive copies of all tickets electronically?                      Yes                      No

a. If Yes, please provide the contact information

Name: \_\_\_\_\_                      Email: \_\_\_\_\_

2. Would you like to receive your monthly statements electronically?                      Yes                      No

a. If Yes, please provide the contact information

Name: \_\_\_\_\_                      Email: \_\_\_\_\_

3. Do you require a signature on your tickets?                      Yes                      No

4. Do you require a PO to be on tickets?                      Yes                      No

5. Is there any other information you require for your tickets? Please list below...

Please mail back to:

Phillips County Landfill  
PO Box 131  
Holyoke, CO 80734