

## REQUEST FOR CART REPLACEMENT OR ADDITIONAL CART SERVICE

DateOrig	eOriginal Cart(s) #		
Name	Phone Number_		
Address			
Replacement of Automated Cart	Trash C	Cart Recy	cling Cart
Please explain the circumstances for	or requiring a repl	acement cart (i.e. lo	st, stolen, irreparable damage)
Normal wear and tear replacement	is free- PW will o	determine	
Additional Cart Service	Trash C	eart Recy	cling Cart
Please explain reasons for requestir	ng an additional c	art (large family, etc	e.)
For Office Use Only			
Proof of Residence:(utility bill, driver's license, mortgage bill)	)		
Replacement			
Recycling Cart(250.00)	Trash Cart	(\$250.00)	Total:
#	#		
Additional Trash and Recycling S	Service		
Recycling Cart(\$250.00)			
	Cart#		
Trash Cart(\$250.00)			