

**CITY OF GALLATIN**  
*Public Works Department*

**GARBAGE CAN SALE**

(For residents **inside** Gallatin City Limits only. **No sales outside City Limits**)

**Please print clearly** (1<sup>st</sup> section only to be completed by resident)

Name \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Street Address \_\_\_\_\_

Telephone \_\_\_\_\_

Monthly Billing for Trash pick-up will be charged to your Utility Bill. The rate is \$8.00 per container per month.

Check one: Bill for one container \$8.00 \_\_\_\_\_ Bill for two containers \$16.00 \_\_\_\_\_

Do you want us to pick up your old can? YES \_\_\_\_ NO \_\_\_\_

Please indicate your utility provider: Circle only one for each service, if provided

<b>UTILITY SERVICE PROVIDER</b>	<b>GAS →</b>	<b>WHITE HOUSE or GALLATIN or NONE</b>
	<b>WATER →</b>	<b>WHITE HOUSE or GALLATIN or NONE</b>
	<b>SEWER →</b>	<b>WHITE HOUSE or GALLATIN or NONE</b>

**Action Requested: (to be completed by the Recorder's Office)**

Deliver \_\_\_\_\_ garbage can(s)

Paid for by Check# \_\_\_\_\_ Cash Amount paid \$ \_\_\_\_\_

Request taken by \_\_\_\_\_

Faxed to : Environmental Services Division @ 451-5933 on \_\_\_\_/\_\_\_\_/\_\_\_\_

**Action Taken: (to be completed by Environmental Services Division)**

New can(s) delivered            **1**        **2**        \_\_\_\_\_

New can serial numbers \_\_\_\_\_

Old can picked up    YES \_\_\_\_    NO \_\_\_\_    Old can SN \_\_\_\_\_

Date completed \_\_\_\_/\_\_\_\_/\_\_\_\_    by: \_\_\_\_\_

Day of week for this route:    **Mon**    **Tue**    **Wed**    **Thu**    **Fri**    Driver Initials \_\_\_\_\_