### **EFFECTIVE SEPTEMBER 1, 2016**

# PLEASE NOTE THE FOLLOWING CHANGES FOR DROPPING OFF YARD WASTE

Effective September 1, 2016, Republic Services will be assuming all operational responsibilities for the York County Scale House on Goodwin Neck Road.

If you already have a VPPSA account, then this notice does not apply to you.

Effective September 1, the Scale House will no longer be accepting cash from commercial customers, and residential users NOT from York, Poquoson or Hampton. There will be two options for payment:

- 1. You may apply for a VPPSA account and, once approved, continue to use the scale house as usual (recommended)
- 2. You may continue to pay by cash or check, or as of September 1, by credit card. Drop off costs will be determined at the Compost Facility by a VPPSA staff member and will be based on volume rather than weight. Payment must be made at the Compost Facility booth at the time of drop off.

To apply for a VPPSA account, please print this document- the application is attached.

If you have any questions, please contact us at 757-259-9850.



## Virginia Peninsulas Public Service Authority

Compost Facility 145 Goodwin Neck Road Yorktown, VA 23692

## CREDIT APPLICATION FOR A BUSINESS ACCOUNT

BUSINESS CONTACT INFORMATION				
Title:				
Company name:				
Phone:	Fax:	E-mail:		
Registered company address:				
City:		State:	Zip Code:	
Date business commenced:				
Sole proprietorship:	Partnership:	Corporation:	Other:	
BUSINESS AND CREDIT INFORMATION				
Person responsible for payment:				
Primary business address:				
City:		State:	Zip Code:	
How long at current address?				
Telephone:	Fax:	E-mail:		
Bank name:				
Bank address:		Phone:		
City:		State:	Zip Code:	
Type of account:	Account number:			
Savings				
Checking				
Other				
BUSINESS/TRADE REFERENCES				
Company name:				
Address:				
City:		State:	Zip Code:	
Phone:	Fax:	E-mail:		
Type of account:				
Company name:				
Address:				
City:		State:	Zip Code:	
Phone:	Fax:	E-mail:		
Type of account:				
Company name:				
Address:				
City:		State:	Zip Code:	
Phone:	Fax:	E-mail:		
Type of account:				

#### **AGREEMENT**

- 1. All invoices are to be paid 25 days from the date of the invoice. All balances are subject to a finance charge of 18% APR and a late payment fee of \$25.00.
- 2. By submitting this application, you authorize 1BVirginia Peninsulas Public Service Authority to make inquiries into the banking and business/trade references that you have supplied.

SIGNATURES			
Title: Date:	Title: Date: HORIZED TO USE THE FACILITY		
INDIVIDUALS ACTIONIZED TO GOL THE PAGELITY			
Printed Name	Signature		
rinted Name	Signature		
Printed Name	Signature		
Printed Name	Signature		
Printed Name	Signature		
Printed Name	Signature		
LIST OF VEHICLES			
Vehicle Number/Make & Model:			
Vehicle Number/Make & Model:			
Vehicle Number/Make & Model:			

#### NOTE:

Only those individuals and vehicles listed above will be authorized to use the VPPSA Compost Facility to drop off material and purchase material.