



# TEXAS DISPOSAL SYSTEMS, INC. SERVICE AGREEMENT

www.texasdisposal.com

AUSTIN  
PO BOX 17126  
AUSTIN, TX 78760  
(800) 375-8375

FAX TO: 512-329-4968

SERVICE AGREEMENT #

<input checked="" type="checkbox"/> <b>X NEW ACCOUNT</b>		Customer Number:	
<input type="checkbox"/> <b>SERVICE LEVEL CHANGE</b>		<input type="checkbox"/> <b>UPDATED SERVICE AGREEMENT</b>	
<input type="checkbox"/> <b>NEW SERVICE LOCATION</b>		<input type="checkbox"/> <b>OTHER</b>	
Salesperson Name: Ja-Mar Prince		Notepad Entry:	
Start Service Date: <b>10/8/2020</b>		S/T Code:	
Alpha Search:		PO#	
Customer Name: Williamson County Parks and Recreation			
Billing Name: <b>Williamson County Parks and Recreation</b>			
Billing Address: 219 Perry Mayfield Blvd.			
City: Leander		State: TX	
Zip: 78641		Tax Entity:	
Service Address: 194 Reveille Way			
City: Liberty Hill		State: TX	
Zip: 78642		Phone: 512-943-5265	
Fax#		Alternate # <b>512-943-1920</b>	
Service Contact: Alejandra Urista		Accounts Payable Contact:	
Email Address: Alejandra.urista@wilco.org		Cycle:	
Map Grid:			
Special Instruction Line 1: (1)8yd maintenance yard, (1) 6 yd at Trailhead Parking, (2)6yds RV Camp, (1)6yd Walk In Camp, (1)3yd RV Dump			
Special Instruction Line 2:			
Other Info: 3.5% annual increase			
FINAL APPROVAL BY OPERATIONS IS REQUIRED PRIOR TO THE START OF THE CONTRACT			

## COMMERCIAL

☒ FRONT LOAD ☐ SIDE LOAD ☐ RECYCLE  
☐ LOCKING LIDS ☐ SINGLE STREAM ☐ CASTERS

## ROLL OFF

☐ PERMANENT ☐ TEMPORARY ☐ SPECL WASTE ☐ PSU ☐ OPEN TOP  
☐ COMPACTOR ☐ CUST.OWNED

QTY(TRASH)	SIZE	FREQ PER WEEK	MONTHLY CHG
1	8yd - T	OAM	\$107.00
1	6yd - T	OAM	84.00
2	6yd - T	OAM	168.00
1	6yd - T	OAM	84.00
1	3yd - T	OAM	56.00

QTY	SIZE	RENTAL RATE	HAUL RATE	DELIVERY FEE	LANDFILL FEE

MONTHLY CHARGE \$499.00

OTHER CHARGES \$  
\$

ESTIMATED NUMBER OF HAULS PER MONTH :

SPECIFY OTHER CHARGES:

SPECIFY OTHER CHARGES:

TOTAL MONTHLY CHARGE BEFORE TAX \$

INITIAL TERM - 12 MONTHS, UNLESS OTHERWISE SPECIFIED  
APPLICABLE SALES TAX WILL BE CHARGED UNLESS CUSTOMER PROVIDES A TAX EXEMPTION CERTIFICATE FOR EACH EXEMPT SERVICE LOCATION

TEXAS DISPOSAL SYSTEMS  
Authorized Signer: Ja-Mar Prince

TDS CUSTOMER  
Authorized Signer: Bill Gravell

Print Name: Ja-Mar Prince

Print Name:

Title: Account Manager

Title:

Date: **10-1-2020**

Date:

## SERVICE CHANGES

	QTY	SIZE	CHARGE CODE	FREQ PER WEEK	MONTHLY CHG	HAUL RATE	RENTAL RATE
N							
E							
W							
O							
L							
D							

Date Service Received:		WO#	Proration Code:
From: / /	To: / /	Entered By:	Date:
Verified By:		Date:	

ADDITIONAL TERMS AND CONDITIONS ON PAGES 2&3