



PAYMENT FORM
FOR ADDITIONAL TRASH CART

CHECK ALL THAT APPLY

- 95-Gallon Trash Cart (\$75 each * qty____) \$:_____
- 65-Gallon Trash Cart (\$75 each * qty____) \$:_____

Total # of additional carts purchased:_____

Total Amt Due:_____

- I understand this cart purchase is IN ADDITION to the free trash cart I will be receiving in May 2018.

PLEASE NOTE, TRASH CART PURCHASES WILL NOT BE DELIVERED
BEFORE MAY 2018.

NAME (First, Last):_____

PROPERTY ADDRESS:_____

PHONE #:_____

EMAIL:_____

TOTAL AMOUNT CHECK ENCLOSED: \$_____

CHECK #:_____ DATE:_____

Mail to: 5300 N Marlborough Dr., Whitefish Bay, WI 53217 –or-
Pay In Person: 155 W. Fairmount Ave., Whitefish Bay, WI 53217