

## SOLID WASTE DEPARTMENT 636.498.6565 X 203 LINDSAY.JONES@CITYOFCOTTLEVILLE.COM

## **ROLL OFF DUMPSTER FORM**

I hereby give my permission for the City of St. Peters to deliver and pick up a roll-off box to the following address:	
Street Address/Subdivision	
agents, representatives, and employees, administrative proceedings, claims, demands whatsoever kind or character which are or whether proximate or not, to the delivery and Further, the undersigned homeowner hereby	efend, indemnify and hold harmless the City, including its from and against any and all suits, actions, legal or a damages, losses, penalties, fines, costs, and expenses of may be asserted against the City relating in any manner, dipick up of a roll-off box to the above referenced address. It releases the City, its employees, agents, successors and ission or upon the authority of them, from any liability related the above referenced address.
Fees I, the undersigned homeowner understands the fee for this service is \$255.00 for one-time drop-off, pick-up, and net weight up to 5 tons. Additional tonnage over 5 tons is billed at \$34.00 per ton. Non-use fee is \$7.00/day after 7 days per drop. Additional fees as follows for appliances: \$17 additional for each appliance (i.e. washer, dryer, dishwasher, refrigerator, freezer, air conditioner, ETC).  Check One:	
20 cubic yard dumpster 30 cul	oic yard dumpster [] 40 cubic yard dumpster
XHomeowner's Signature	Phone Number  Requested Delivery Location
City of Cottleville Office Use:	
Date Received:	Check No.:
Fee Receipt No.:	City Representative:
Total Amount Paid:	Notes:
Roll Off Number:	
Driveway Type: CONCRETE ASPHALT GRAVEL OTHER	
Visible Damage: ☐ CRACKED ☐ PITTED ☐ SETTLING/DEPRESSIONS ☐ EROSION	
Notes:	