



City of Tontitown Water Utility
 PO Box 127, Tontitown AR 72770
 Phone: 479-361-2700
 Physical Address: 201 E Henri de Tonti Blvd,
 Springdale AR 72762
Billing@tontitownar.gov

SOLID WASTE SERVICE APPLICATION-RESIDENTIAL

Date: _____

Service Address: _____

Date Service Requested: _____

Customer Name: _____

Mailing Address: _____

City & State: _____ Zip Code: _____

Driver License #: _____ State: _____

E-mail Address: _____

Home Phone: _____ Cell Phone: _____ Work Phone: _____ Ext: _____

Last Water Company with which you had service: _____

Previous Address: _____ (These must not be left blank. Act 769 of 2003)

Please choose one or more of the following services:

*******Trash Pickup Day Wednesday, place trash out night before to ensure pickup*******
We *do not* provide containers

Solid Waste Service: _____ 4 bag _____ 8 bag _____ 12 bag

Yellow Bag Program (Program offered to senior citizens, age 65 or greater.)

Recycling (Additional cost per month)

Is this property: Owned Rented

Signature _____

Printed Name _____



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SERVICE AGREEMENT

Date _____ Account #: _____

Service Address _____

This service agreement is to guarantee the due payment of any indebtedness for any service due Tontitown Water Utility. The undersigned customer also agrees to comply with all rules and regulations of Tontitown Water Utility now in effect or those that may be hereafter established by Tontitown Water Utility. When service to the above customer at the stated address is permanently discontinued, and payment of all amounts due the Tontitown Water Utility are cleared, the account will be put out of service.

By Signing below:

1. I agree and understand that I must provide written notice of disconnect when I vacate the service address.
2. I agree to and accept the Tontitown Water Utilities Terms and Conditions of Service, including any updates, revisions and amendments.
3. I understand that the City of Tontitown only provides solid waste service inside the Tontitown City Limits and is serviced by a 3rd party vendor.

Customer Signature _____

Printed Name _____