

TOMPKINS COUNTY RECYCLING AND SOLID WASTE CENTER CREDIT POLICY

1. Payment must be made at the time of waste disposal, unless customer has been previously approved to charge. Cash or personal checks are accepted. A \$20.00 fee will be assessed for any returned check.
2. Credit accounts are available to commercial permit accounts only.
3. Applications for commercial accounts are available at the Tompkins County Solid Waste Management Division at 122 Commercial Avenue, Ithaca, NY.
4. Completed applications should be returned to the Solid Waste Management Division. The Division Office hours are Monday through Friday, 8:00 to 4:30. Applicants will be notified within 30 (thirty) days of credit approval or denial.
5. Statements will be sent out monthly and payment is due in full on the last day of each month. An interest rate of 1.5% per month will be charged on the outstanding balance beginning the first day of the following month.
6. Any account that has an unpaid balance 60 (sixty) days after the invoice date will have charging privileges revoked, and after 90 (ninety) days will not be allowed to use the Tompkins County Recycling and Solid Waste Center for waste disposal. Upon payment of all unpaid credit balances, the use of the Tompkins County Recycling and Solid Waste Center will be on a cash-only basis for a period of one year, after which time another credit application may be submitted for consideration.
7. Additional vehicles may charge under the same account number as long as they have valid commercial permits and written authorization to do so.

**Tompkins County Solid Waste Management Division
Recycling and Solid Waste Center
CHARGE APPLICATION**

BUSINESS INFORMATION:

Name: _____

Address: _____

City, State, Zip: _____

Telephone Number: _____

Fax Number: _____

Email Address: _____

Number of vehicles using facility: _____

Frequency of visits to the Center: (daily, etc.): _____

EPA ID Number (if business has one): _____

Permit / Hauler License Number(s): _____

BUSINESS OWNER INFORMATION:

Name: _____

Address: _____

City, State, Zip: _____

Telephone Number: _____

Email Address: _____

Social Security Number: _____

CREDIT REFERENCES:

1. Name: _____
Address: _____
City, St, Zip: _____
Phone: _____
Type: _____
(loan, charge acct, etc.)

2. Name: _____
Address: _____
City,St,Zip: _____
Phone: _____
Type: _____
(loan, charge acct, etc.)

I, _____, hereby agree that I have read, understood and agree to abide by the terms of the Tompkins County Solid Waste Management Division Credit Policy.