

**MONTHLY ACCOUNT AGREEMENT  
for  
SINGLETON WASTE DEPOT**

General Manager  
Singleton Council  
PO Box 314  
SINGLETON NSW 2330

Operations Division  
Water & Waste  
Phone: 02 6578 7310

**Monthly Account for Tipping Fees at  
Singleton Waste Depot**

I hereby request Council set up a Monthly Account in my name for tipping fees my company/organisation incurs at the Singleton Waste Depot.

Drivers will collect and check dockets received at the gatehouse.

I nominate the following vehicles for acceptance by Council Staff at the gate when issuing dockets for monthly accounts.

DESCRIPTION OF VEHICLE	REGISTRATION NUMBER
<i>E.g. Vehicle Type – small tipper, semi, truck and dog</i>	

**Company/Organisation Billing Details**

Company Name:.....

Postal Address:.....

Street Address:.....

Phone Number: ..... Account Limit: .....

Contact Name: ..... Phone Number: .....

Signature Manager/Director:.....ABN.....

**OFFICE USE ONLY**

Date details entered into Waste Depot programme:.....

Signature: ..... Date: .....

Gatehouse     Accounts Receivable     Entered on Main Computer

**Account References**

Please supply the details below of **2** companies you currently have accounts with:

1.

Company Name:.....

Address:.....

Phone Number: ..... Contact Name: .....

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2.

Company Name:.....

Address:.....

Phone Number: ..... Contact Name: .....

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