

Town of Gretna

Request for Dumpster Service

Date: _____

Business Name: _____

Service Address: _____

Billing Address: _____

Contact Information:

Name: _____

Phone: __ (____) _____

Email: _____

Dumpster Size:

4 yard 6 yard 8 yard

Rental Fees: *(billed monthly)*

\$20.00

\$22.00

\$24.00

Dumping Fees: *(billed per occurrence)*

\$10.00

\$15.00

\$20.00

Scheduled Pickups: _____

Date for service to begin: _____

Placement of Container: _____

Additional Notes: _____

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INTERNAL/OFFICE USE ONLY

Order Information:

Company issuing container: _____

Dumpster Cost: _____

Delivery Date: _____