## **Application for Solid Waste Charge Account**

Applicant r	needs to check the foll	owing to apply for a line of cr	edit, and understand the terms of the line of credit:	
			property in Beltrami County with a property parcel number, or are a ne necessary credit assurances from their financial institution.	
	Use Demo Landfill or Deliver By-Pass Material to the Transfer Station more than 36 times a year, and/or have multiple employees that need to use Beltrami County Solid Waste Services.			
	All invoices are to be paid 30 days following the date of the invoice, all invoices not paid within 30 days will be subject to 1.5% per month interest.			
	Accounts will be "froze" that have more than a \$2000.00 in past due invoices, accounts that have been "froze" will only be allowed to use our services by paying cash or a credit card.			
		nance the County Board of C nterest (Delinguent Accounts	ommissioners shall certify all unpaid outstanding debt to the applicants ).	
If you don		, .	can always use cash, or a credit card.	
Name of	Business			
			Zip Code	
Owner / Co	ontact of Business_			
Telephone#Fax#				
Billing Add	ress Name		· · · · · · · · · · · · · · · · · · ·	
А	ddress			
C	ity	State	Zip Code	
Te	elephone#	Fax#		
E-	-Mail			
	Preferred Met	hod to Receive Invoices:	□ Email □ Mail □ Both	
Property 1	Гах Parcel Number	(Used for Delinquent Ac	ecounts)	
Do You Ov	wn Property Busines	ss Is Located On?   Yes	□ No	
If No, Plea	se Indicate the Rea	Property that will be used	to secure any unpaid balance:	
Real Prope	erty:			
Owner Name			Telephone #	
Address				
City State		State	Zip Code	
This inform	nation must be as co	omplete and accurate as po	ossible. Please mail to the address below.	
Signed		Title		
	unty Solid Waste al Park Dr SE 56601	Billing Phone: 218-333-8105 Billing Email: <u>kari.smith@cc</u>		