

County of Yolo

DEPARTMENT OF COMMUNITY SERVICES DIVISION OF INTEGRATED WASTE MANAGEMENT

Marissa Juhler
DIRECTOR

44090 County Road 28H, Woodland, CA 95776
(530) 666-8852 FAX (530) 666-8853 www.yolocounty.org

Dear Valued Customer:

Thank you for your interest in setting up an account with the Yolo County Central Integrated Waste Management (IWM). The attached application must be filled out in entirety to be considered for an account. Please complete the application and return it to the IWM accounting office for processing.

Upon approval you will be provided an Account Number; which will be the primary means of identifying your account.

STEPS FOR CUSTOMER ACCOUNT SETUP:

1. Complete the attached document, "Customer Application for Monthly Account Billing"
2. Read and sign the document labeled "Agreement"
3. Return all completed documents to the following:

Yolo County Integrated Waste Management (IWM)
44090 County Road 28H Woodland, CA 95776-9101
Attention: Keith Lane FAX: (530) 666-8853
E-mail: Shelby.milliren@yolocounty.org

ACCOUNT CONDITIONS (revised conditions effective June 1, 2020)

1. To Qualify for charge account establishment, a customer must bring in an average of 50 tons/month over a 12-month period. If an account is established for a customer and they don't average 50 tons/month; the account may be closed and the customer will be notified of the account closure by e-mail or telephone. The customer will be required to pay any open balance in full within 30 days. The customer will then be immediately converted to paying on a credit card or check payment basis.

The accounts will be monitored by the IWM accounting office to check if existing IWM customers are averaging 50 tons/month.

2. Monthly balances are due upon receipt of the statement. For example, the first week of December the customer receives their statement November; upon receiving the November statement by e-mail or mail the statement is considered due.
3. Accounts with a 30-day balance are considered past due and may have their credit privileges suspended.
4. A 5% service charge will be assessed to all accounts with any 60-day balances. Accounts with 60-day balances may have their credit privileges suspended. Any open balance will be due immediately, and if not paid, collected through a credit agency or legal action. Costs incurred by County of Yolo Integrated Waste Management to collect an account, including attorney fees, expenses, and court fees will be paid by the applicant.
5. Only businesses located or conducting business within Yolo County will be considered for account eligibility. Individual requests from other businesses may be considered on a case-by-case basis.
6. Once responses are received from the references, this office will notify the potential customer by e-mail or telephone as to account establishment.
7. Violations of rules and regulations established for the disposal Site shall be sufficient cause to cancel accounts and may bar the applicant from any further use of the site.

FEES

Please see the current Yolo County Central Landfill Fee Schedule for a list of all fees.

LOAD INSPECTION

The contents of each load will be inspected upon arrival at the YCCL by landfill staff to determine the cost of the entire load based on the fee schedule. The driver is responsible for verifying the price **prior** to dumping. It is possible that assessment of the load by your project staff will not match that of the landfill staff. This could potentially result in a significantly higher cost associated with your project.

To avoid any misunderstandings, have your project staff inform the driver of the anticipated price (cost per ton) of the loads. A telephone is available for the driver's use to contact your project staff in the event that the price quoted by landfill staff is higher than anticipated. The driver is also responsible for signing the receipt verifying the type of material dumped and the cost.

VEHICLE IDENTIFICATION NUMBERS

You can ensure speedy service by putting the account number and an identification number for each truck and each drop box on both sides of the trucks and drop-boxes that arrive at the YCCL. The numbers should be at least three inches high and clearly visible against the background color of the vehicle. Please follow the numbering method as shown on the attached sheet titled "Vehicle Numbering System" and as indicated below.

Example: "YCCL Account Number – Truck or Box Number" (XXX-XXX).

After each truck or drop box has visited the Landfill **ten times** or more, an average tare weight can be assigned to the identification number corresponding to each truck or drop box. This information will be stored in our computer and will be used to compute the net weight each time that truck and drop box return with a load.

Please be sure to read the both the application and agreement carefully. Complete the application in its entirety and sign the agreement. Should you have any questions, do not hesitate to contact Keith Lane at (530) 666-8444.

Sincerely,

Marissa Juhler, Director
Community Services, Division of Integrated Waste Management

Attachments:

Customer Application for Monthly Billing
Agreement
Vehicle Numbering System

CUSTOMER APPLICATION FOR MONTHLY ACCOUNT BILLING
Yolo County Central Landfill

Application is hereby made for credit for monthly account billing to be made for use of Yolo County Solid Waste Disposal Facilities under the terms and conditions contained in this application and agreement.

Name of Company: _____

Owners Name: _____

Physical Address: _____
(Street) (City) (State) (Zip)

Billing Address: _____
(Street) (City) (State) (Zip)

Business Phone: _____ Fax: _____ Email: _____

1. Do you currently or have you in the past had an account with Yolo County Central Landfill?
If so, under what name?

2. Approximately how many different vehicles will enter the disposal site each month?

3. What type of material does your company haul?

4. Approximately how many tons of material will be delivered each month? _____
(50 tons a month over a 12-month period minimum)

5. List two (2) current credit references their addresses, phone & fax numbers:

(name) (address) (phone) (fax)

(name) (address) (phone) (fax)

Name of your bank: _____ Branch: _____

Business License # _____ Taxpayer ID #: _____

Social Security # _____ State Driver's License # _____

Submitted by (check one) Sole Proprietor (Owner) Corporation (Officer)

Submitted by: _____ Title _____
(Print Name)

Signature _____ Date: _____

FOR COUNTY USE ONLY Acct. No. _____ our P.O. No. _____

AGREEMENT

County of Yolo, California

In consideration of the County of Yolo furnishing waste disposal services to the APPLICANT on a calendar month basis, APPLICANT agrees to the following terms regarding use of Disposal Site by APPLICANT or authorized representatives:

1. APPLICANT shall utilize the site and pay COUNTY user fees on a calendar month basis. Charges shall be compiled each month and a statement thereof shall be rendered. The APPLICANT shall pay said charges immediately upon receipt of the statement.

Failure to pay said charges shall result in suspension of user privileges at the sole option of the COUNTY.
2. This Agreement may be terminated by the COUNTY upon ten (10) days written notice to the APPLICANT, (by email or mail)
3. The County of Yolo is authorized to investigate APPLICANT's financial record and report to proper persons and bureaus his performance under the Agreement.
4. APPLICANT hereby agrees to observe all rules and regulations of the Disposal Site, and further agrees to assume all liability for any costs incurred by COUNTY in collecting late payments in addition to payment of fees as determined by the Board of Supervisors.
5. The information furnished on this application submitted to the COUNTY is for the purpose of obtaining a customer account and it is understood that COUNTY will rely upon this information in providing such services to APPLICANT.
6. APPLICANT hereby certifies that the information given on this application is true, correct, and complete.

APPLICANT: _____

BY: _____
(Signature)

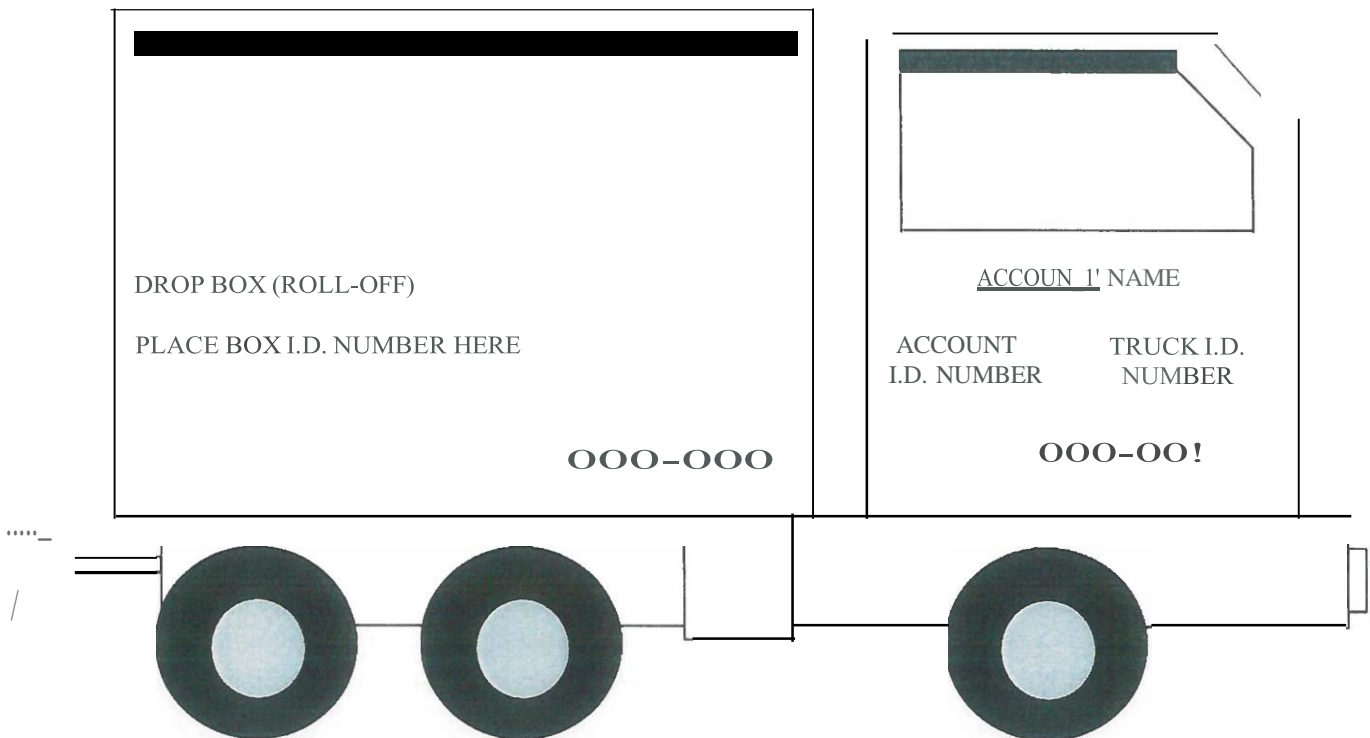
TITLE: _____

DATE: _____
Approved by COUNTY OF YOLO

By: _____

Date: _____

Yolo County Central Landfill Vehicle Numbering System



Numbers should be at least 3" high, contrast with vehicle color and appear on both sides of the truck and container.