

No-Service/Haul Your Own Sanitation

Please return this completed request to City of Davis Finance Department 23 Russell Blvd, Suite 3 Davis, CA 95616

Phone: (530) 757-5651 Email: financeweb@cityofdavis.org Fax: (530) 758-0204

Service Address:	Account Number:
Phone Number:	Email Address:
The \$31.00 per/month No Sanitation	ervice Rate is available providing notification given to the city prior to occurrence,
notification has been verified by the ci	and the following conditions are met:
I,	(print name), declare that I am the owner of the parcel or authorized agent a
responsible party for garbage fees at _	
	Service Address
I hereby request No Sanitation Service	rsuant to the following conditions:
I will dispose of my sanitation in the f	wing manner:
☐ Yolo County Landfill, Road 104 & F	d 28H, Woodland (530) 666-8730
Frequency:	
☐ Daily ☐ 3 times/week ☐ 2 times/v	k □ Weekly
above. During this period, there will be the street for pick-up as well as contains	sanitation service in the event that I am unable to dispose of my sanitation as prescript household containerized waste for pick-up at this address. You may still put yard refusized recycling. I also understand that paying an individual or another customer to dispost franchise agreement with Recology Davis and is not allowed.
± •	rrent basis. No credit will be issued for any penalties that accrue on any unpaid or No Sanitation Service will be no earlier than the date the Finance Office receives the
Signature of Owner/Agent	
	For Use by City of Davis Finance Only
Finance Signature	 Date
Comments:	