



Welcome to Alaska Waste's EASY PAY plan!

Alaska Waste is pleased to offer our customers the option to pay automatically by credit card or checking account. If you would like to take advantage of this automatic payment service, please read and fill out the information below, then return to our office at 47323 Merrywood Ave. Soldotna, AK 99669, mail it to PO Box 1209, Soldotna, AK 99669, fax it to 262-4370, or email it to johannaw@akwaste.com.

For further information, call Alaska Waste at 283-9390

EASY PAY TERMS AND CONDITIONS

As an enrollee in this program, I understand that;

1. I will receive a bill even though I am on the Easy Pay plan. It will show me the amount of my refuse bill and **the amount to be charged to my credit card or checking account within the first 10 days of the billing period.**
2. If Alaska Waste fails to charge my account, any finance charge, which results, will be credited to my account.
3. If charges to my credit card or checking account are declined for any reason, Alaska Waste will attempt to contact me for an alternate payment arrangement. If I cannot be contacted or do not make alternate payment arrangements, my account will be subject to normal credit procedures for non-payment. If charges to my credit card or checking account are declined twice within a 12-month period, Alaska Waste may terminate my Easy Pay service and I may be charged a decline fee.
4. Only one credit card company or bank will be billed for each refuse account.
5. I will notify Alaska Waste if I wish to cancel this agreement.
6. ***If my credit card number or checking account information changes for any reason, including lost or stolen credit cards, I will notify Alaska Waste of the new account information. If I fail to provide this information prior to the due date and Alaska Waste is unable to process my payment, I will be responsible for an alternate payment arrangement and any finance charges, which may result.***
7. Alaska Waste may cancel or update the agreement, at any time, upon 30 days written notice.

Customer Name: _____

Mailing Address: _____

Refuse Account Number: _____

Home Phone Number: _____ Work Phone Number: _____

PLEASE CHOOSE: ONE TIME ONLY (credit card option only) or AUTOMATIC BILLING

Payment Amount \$ _____

<p style="text-align: center;">CREDIT CARD</p> <p>Name: _____ (As it appears on card)</p> <p>Circle card type: Visa MC Disc Amex</p> <p>Card number: _____ - _____ - _____ - _____</p> <p>Expiration Date: _____ / _____</p>	<p style="text-align: center;">CHECKING ACCOUNT</p> <p>Name: _____ (As it appears on account)</p> <p style="text-align: center;">PLEASE INCLUDE A VOID CHECK (Provides necessary bank information)</p>
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I, the undersigned, authorize Alaska Waste to charge my refuse billing to the credit card or checking account indicated above, and I agree to the Easy Pay terms and conditions listed above.

Signature: _____ Date: _____

Alaska Pacific Environmental Services Anchorage, LLC dba Alaska Waste
47323 Merrywood Ave., PO Box 1209 Soldotna, AK 99669
Office Phone: 907.283.9390 -- Fax 907.262.4370