

# Easy Pay

... the easiest way to pay your garbage bill !

If you have any questions, please feel free to contact a Customer Service Representative at (530) 876-3340.

## Easy Pay Authorization Agreement.

I hereby authorize Northern Recycling & Waste Services to debit funds from my Checking account listed below to pay garbage service bills. I understand that these automatic payments may be cancelled if I notify Northern Recycling & Waste Services (written statement may be required).

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Name of your bank

Your name as shown on financial records

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Service Address

City

State

Zip Code

Daytime Phone Number

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Name on Northern Recycling & Waste Services Customer Account

22-

Customer Acct#

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Your Signature

Today's Date

## Now you can pay your garbage service bills the easy way – with Easy Pay HERE'S HOW IT WORKS.

By enrolling in Easy Pay, your financial institution will deduct funds from your checking account to pay your garbage service bills. Your bill will be paid for you automatically. You won't have to worry about missing a payment if you are away on business trips or vacations. Your bill will be paid on time. You'll continue to receive your periodic billing statements for your reference and to track the amount debited from your checking account. You can notify our office if you wish to discontinue Easy Pay for any reason.

## IT'S EASY TO START EASY PAY

Simply complete this form and return it along with an original check marked "VOID" from the checking account you wish debited to **NRWS Po Box 2529 Paradise, Ca. 95967**. Your next bill will show the automatic payment note on the top right hand corner of the statement, your bank or financial institution will show the appropriate debit on your monthly bank statement.

Payments will be debited from your account on the 2<sup>nd</sup> Thursday  
of each billing period.

Residential: 2<sup>nd</sup> Thursday of the quarter: January, April, July, & October  
Commercial/Industrial: 2<sup>nd</sup> Thursday of Each Month

**Re-occurring Credit Card (RCC) Payment Authorization Form**  
**VISA / MASTER CARD ACCEPTED**

PLEASE COMPLETE AND SIGN THE CHARGE FORM BELOW AND FAX IT TO 530-877-3825 OR MAIL TO NORTHERN RECYCLING & WASTE SERVICES, LLC. P.O. BOX 2529 PARADISE, CA 95967-2529 OR DROP OFF AT 920 AMERICAN WAY, PARADISE. PLEASE INCLUDE A COPY OF YOUR DRIVERS LICENSE, AS SIGNATURE VERIFICATION IS REQUIRED.

CARDHOLDER NAME \_\_\_\_\_

COMPANY (IF APPLICABLE) \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE# \_\_\_\_\_

EMAIL \_\_\_\_\_

CREDIT CARD TYPE (CIRCLE ONE) :        VISA        MASTERCARD

C/C# \_\_\_\_\_ EXP \_\_\_\_\_

SECURITY CODE \_\_\_\_\_ (3 OR 4 DIGIT # ON BACK OF CARD)

D/L # \_\_\_\_\_ EXP \_\_\_\_\_

PLEASE INCLUDE A COPY OF YOUR DRIVERS LICENSE WITH THIS FORM

I, THE UNDERSIGNED, HEREBY AUTHORIZE NORTHERN RECYCLING & WASTE SERVICES, LLC TO CHARGE MY VISA OR MASTER CARD FOR ALL INCURRED CHARGES RELATING TO THE RESIDENTIAL, COMMERCIAL, AND/OR RESIDENTIAL SERVICES FOR THE FOLLOWING ADDRESS(S)

SERVICE ADDRESS \_\_\_\_\_ ACCOUNT 22- \_\_\_\_\_

SERVICE ADDRESS \_\_\_\_\_ ACCOUNT 22- \_\_\_\_\_

SERVICE ADDRESS \_\_\_\_\_ ACCOUNT 22- \_\_\_\_\_

I, THE AUTHORIZED USER UNDERSTAND IF MY CREDIT CARD PAYMENT IS DECLINED TWICE IN A 12 MONTH PERIOD, THE RE-OCCURRING CREDIT CARD INFORMATION WILL BE REMOVED.

**AUTHORIZED CARD HOLDER SIGNATURE & DATE:** \_\_\_\_\_