



CITY OF MANTECA

Finance Utility Department – Request for Interruption of Refuse Service

Please return application to:

**City of Manteca • Finance Department • 1001 W. Center St • Manteca • CA • 95337
(209) 456-8740 • (209) 923-8930 fax • utilitystart@mantecagov.com e-mail**

APPLICATION: REQUEST FOR INTERRUPTION OF REFUSE SERVICE

Terms for service interruption are as follows:

- 1. Property must be vacant for at least 30 days. Refuse service cannot be interrupted if less than 30 days.**
- 2. Vacation Suspension can only be requested once per 12 consecutive months.**
- 3. If carts are not set out on the date of scheduled pick up, customer will be charged \$51.78 for each attempt**
- 4. No retroactive coverage is authorized and we are unable to backdate.**

Redelivery Date: _____

Service Address: _____

Name on Account: _____ **Account Number:** _____

Phone Number: _____ **Secondary/Work Phone Number:** _____

E-Mail Address: _____

Please explain reason for interruption:

By signing below, I understand and accept the terms for refuse service interruption. I understand when my interruption expires, services will automatically begin billing and carts will be redelivered to my property. Carts will be delivered curbside and it is my responsibility to ensure that carts are brought into the property. Failure to put away carts may result in being sent to Code Enforcement.

Signature: _____ **Date:** _____

Per City ordinance 13.02.065

When premises is temporarily scheduled to be unoccupied, service may be suspended for a period not to exceed six months upon completion of a “Request for Interruption of Refuse Service” form and payment of the “Vacation Suspended Service” fee per the adopted fee schedule. Following payment, all carts will be pulled, and the monthly service charges will not be collected until the specific return date when carts will be returned. Suspension will not be initiated until carts are collected by the City.

Office Use:

Date Carts Pulled: _____

Initial \$120 Rec'd: _____ **Work Order#:** _____ **Staff Initial Complete/Date:** _____