



# ACCOUNT INFORMATION FORM

Effective Date:

Submitted by:

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## GENERATOR

Name	
Address	
City	
State	
Zip	
EPA ID#	
Contact	
Title	
Phone	
Fax	
Cell	
Email	

## INVOICE / BILL TO

Name	
Address	
City	
State	
Zip	
EPA ID#	
Contact	
Title	
Phone	
Fax	
Cell	
Email	

## SERVICE SITE & CONTACT

Name	
Address	
City	
State	
Zip	
EPA ID#	
Contact	
Title	
Phone	
Fax	
Cell	
Email	

## MANIFEST MAIL TO

Name	
Address	
City	
State	
Zip	
EPA ID#	
Contact	
Title	
Phone	
Fax	
Cell	
Email	

Receiving Hours	
Preferred Service Time	
Preferred Service Day	
Lift Gate Needed?	
Drum Dolly Needed?	
Pallet Jack Needed?	
Can Accommodate Large Trailer?	
Special Instructions for Service:	

### Specific Instructions for Treatment of Waste


### Specific Instructions for Transport of Waste


- CREDIT APPLICATION has been SENT TO the CLIENT.
  - COMPLETED & SIGNED CREDIT APPLICATION ATTACHED
- SERVICE AGREEMENT has been SENT to the CLIENT.
  - SIGNED SERVICE AGREEMENT ATTACHED
- QUOTATION has been SENT TO the CLIENT.
  - SIGNED QUOTE ATTACHED
- WASTE PROFILE has been SENT TO the CLIENT.
  - SIGNED PROFILE ATTACHED

- SERVICE REQUEST has been SENT to TSR.
- Customer will require GEMWARE access.

## Project Manager

Name	
Address	
City	
State	
Zip	
EPA ID#	
Contact	
Title	
Phone	
Fax	
Cell	
Email	

Name	
Address	
City	
State	
Zip	
EPA ID#	
Contact	
Title	
Phone	
Fax	
Cell	
Email	