

Solid Waste Management

Department 2725 Judge Fran Jamieson Way Building A, Room 118 Viera, Florida 32940 Main Number: (321) 633-2042 Email Application:

solidwaste.billing@brevardfl.gov

OPENING A SOLID WASTE MANAGEMENT DEPARTMENT COUNTY LANDFILL DISPOSAL FACILITY GATE ACCOUNT

Chapter 94, Section 94-277, Brevard County Code of Ordinances, requires that any commercial entity that disposes solid waste at the County's landfill facilities, must establish a landfill gate account with the Solid Waste Management Department. Enclosed for completion is a Solid Waste Management Department Gate Account Application, Landfill Agreement, Vehicle Decal Information Sheet, and Credit Card Authorization Form. Please complete the appropriate forms, have them notarized, and return to this office. In addition, the Department will need the following information, depending on the type of entity:

Corporation: A copy of the Board Resolutions that appoint officers to act on behalf of the Corporation. Copy of Business Tax Receipt (required by Chapter 102, Article II of the Brevard County Code of Ordinances).

Partnership: A copy of the Partnership Agreement. Copy of Business Tax Receipt(required by Chapter 102, Article II of the Brevard County Code of Ordinances).

Sole Proprietorship: Copy of Business Tax Receipt (required by Chapter 102, Article II of the Brevard County Code of Ordinances).

Security Deposits:

Chapter 94, Section 94-277, requires that entities who are establishing a Solid Waste Management Department gate account to pay a security deposit. The security deposit amount will be determined once we have reviewed the application. In general, the security deposit is based on the estimated tonnage and type of waste to be brought to the County's landfills. The security deposit will equal two months of estimated disposal fees. The amount of the security deposit required is subject to change as determined by actual usage.

The security deposit can be made in the form of check, surety bond, letter of credit, or Master/Visa/Discover credit card. If you wish to use a credit card for the security deposit, please complete the Credit Card Authorization Form, After review of the application, and receipt of the security deposit, an account number will be assigned.

WE DO NOT ACCEPT ANY DEBRIS FROM OUTSIDE BREVARD COUNTY

Phone (321) 633-2042 Website: BrevardCounty.us/SolidWaste

Decals for Vehicles

Solid Waste Management Department uses a decal system to identify authorized account holders. A decal will be issued for each company vehicle, which will become your "vehicle identification number" for landfill use. This decal number is linked to the account number assigned. The decal must be permanently and conspicuously displayed on the bottom left of the front windshield. Additionally, the decal must be removed and returned to the Solid Waste Department from the vehicle if the vehicle is sold, or no longer utilized. Please make copies of the Vehicle form, and submit a completed form for each vehicle that will require a decal. Anytime a change is needed, please complete this form and return it to the Solid Waste Management Department.

Use of Brevard County Landfill Facilities

The first time you use a landfill disposal facility, your vehicle will be weighed empty to determine it's standard tare weight, which will be stored in our system. All vehicles will be randomly weighed at future dates to validate the accuracy of our database. All charges are determined by weight. Each time you use the landfill disposal facilities, a weigh ticket will be issued electronically which will indicate the weight and charge for that load. Keep a copy of this ticket for your records.

A statement will be issued electronically each month with a compilation of the month's activity and charges. You will have 30 days to pay the amount due on the statement; after 30 days from the date of the statement, the account becomes delinquent. If payment is not received before 60 days, your account will be closed and will not be reopened until the total amount due on your account is paid. If not paid within 90 days, the account may be submitted for collection. If the account remains unpaid, the security deposit will be used to pay the account balance. After the security deposit is used, then the account holder must pay the remaining account balance, if any, plus, the amount of the security deposit that was used to pay the account, in order to have the account reopened. You may also be required to pay an additional security deposit prior to your account being reopened. It is incumbent upon you to contact this office to make arrangements for paying your account if you are not in a position to pay the entire balance due.

When bringing debris to the landfill, you must accurately identify the debris being brought in, and provide a valid street address when asked. The owner must ensure that all employees of the entity comply with the Scale House attendant's direction as to where to take the debris. Failure to accurately identify debris being brought into the landfill, and its origin, may be considered defrauding the government. It is our policy to have personnel spot check loads and to randomly verify addresses. Failure to provide accurate information or comply with directions from Solid Waste Management could result in the account being closed permanently.

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Third Party Authorization:

The submission of the Third Party Agreement, must be signed by the person who opened the account, this is required in order to safeguard the integrity of your account. However, it should be understood that the County considers it your responsibility to monitor any third-party use of your account. Forms available upon request.

Dump Trailer or Roll-Off Permit Requirement:

If your company is one that provides Dump Trailers or Roll-Off containers to customers, then you must obtain a permit from the Solid Waste Department. This permit is good for a period of five (5) years. Forms available upon request.

Non-Hazardous Waste Materials (Special Waste)

Special Waste shall include those wastes that are not normally included under the definition of municipal solid waste. Due to their nature, these wastes cannot be disposed of at the County's solid waste disposal facilities under normal operating procedures, but require special handling or review and approval in accordance with prescribed criteria. All inquiries or requests for disposal of special wastes should be directed to the Environmental Services Section supervisor of the Solid Waste Management Department. You may call (321) 633-2042. A 24 hour notice <u>must</u> be given prior to bringing any special waste to the County's disposal facilities.

Closing an Account:

To close an existing Gate Account and seek reimbursement of the security deposit, a written request must Be signed by owner and submitted to the Solid Waste Management Department.

The Solid Waste Management Department reserves the right to close any account due to one or more of the following: delinquent balance, inactivity, failure to provide Scale House attendants accurate information, abusiveness to Scale House attendants or other Solid Waste employees. Bringing in debris from anywhere outside of the County automatic permanent closure of your Gate Account.

Submission of Application and Documentation

When you have completed filling out the application, you may mail it to the Solid Waste Management Department at, 2725 Judge Fran Jamieson Way, Building A, Room 118, Viera, FL 32940 or Email to solidwaste.billing@brevardfl.gov. The new account will be initiated upon receipt of the application, supporting documents, and security deposit. If everything is in order, the account will be opened within 3 business days or less.

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BOARD OF COUNTY COMMISSIONERS

Solid Waste Management Department

2725 Judge Fran Jamieson Way Building A, Room 118 Viera, Florida 32940 Main Number: (321) 633-2042

Email Application:

solidwaste.billing@brevardfl.gov

GATE ACCOUNT APPLICATION

CORPORATION/LLC						
Full Corporate or LLC Business Na	me:					
Business Physical Address: Street			City			
Business Office Phone	Fax:	Cell:	Bus E	mail:		
Federal I.D. #		Occupational/Bus Tax Receipt #				
SEND COPIES OF THE FOLL 1) Submit a copy of your State Boa	9		l License or Busin	ess Tax Receipt		
INDIVIDUAL BUSINES	S OWNER					
Full Business Name:						
Business Office Physical Address:	Street		City	State Zip		
Business Office Phone	Fax:	Bus Email: _				
Home Physical Address: Street			City	State Zip		
Home Phone:	Fax:	Personal	Email:			
Federal I.D. #	Occupational/Bus Tax Receipt #					
SEND COPIES OF THE FOLL 1) Submit a copy of your Driver Lie			g) /Occupational L	icense or Business Tax Receipt		
List all debris to be disposed of:						
AUTHORIZED SIGNATURE FOR O				RE INDIVIDUAL BUS OWNER BREVARD COUNTY		
FOR OFFICE USE ONLY						
Account # D				y Deposit Prepayment		
□ Check # □ Americ	an Express Disco	over Mastercard	□ Visa □ Sur	ety Bond Letter of Credit		



BOARD OF COUNTY COMMISSIONERS

Form of Identification:

Solid Waste Management Department

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AGREEMENT for Establishing a Gate Account for the Use of Brevard County Solid Waste Disposal Facilities

I,, (Business Owner or Corporate Officer)	(E	Business Name)	
Whose business address is(Street)			
(Street) Agree to pay monthly, all solid waste disposal charges incur the Solid Waste Management Department.	City red in each month upon	State n receipt of an invoic	Zip se for said charges issued by
Pursuant to Chapter 94 of Brevard County Code of Ordinand account in an amount sufficient to pay estimated charges for Brevard County Solid Waste Management Department, or his Master/Visa/Discover card, a Surety Bond or a Letter of Cre a deposit applied back to the credit card when an account is of	a period of two (2) mo is designee. The secur- dit. Security deposits p	onths or longer, as de ity deposit may be su paid with a credit car	termined by the Director of abmitted in the form of a check,
I understand that the full amount of the invoice is due within the 30 days of the invoice date, the account becomes delinque if the balance due remains unpaid after sixty (60) days from Facilities will be discontinued. I further understand that the reopen the account, I agree to pay the balance due, and/or, the understand that my account may be submitted to a collection	the date of the invoice security deposit may be amount of the securi	comes delinquent I w the account may be e used to satisfy the ty deposit used to pa	ill be notified of the delinquency. closed, and use of the Solid Waste outstanding balance. In order to y the delinquent amount. I further
The gate account holder shall provide information about each and on a media to be defined by the County. The County shall media required and shall specify the date the information	all provide the gate acc		
I further agree to notify the Solid Waste Management Depar	tment in writing of any	change in ownershi	p .
Owner:			
Signed before me this day of, 20_	·		
Signature of Notary Public or SW Employee Witness Signat	oure		
My Commission Expires:			



Company/Employee Information

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Instructions: Copy this form to fill out one for each company vehicle.

Important Note: Should you sell your vehicle(s) or your business you must call and notify this office. The decals issued to each vehicle is assigned to that specific vehicle and attached to the Gate Account number. Should decaled vehicles be it company owned or employee owned that you sold or no longer use, begin to utilize the landfill, all charges that are generated will be placed on your account, which makes you responsible for all charges.

VEHICLE DECAL INFORMATION

	Landfill Account #	Phone Number	Fax Number
Send this fo	rm two days prior to your ha Email: solidwaste.billing@		p.m.
Vehicle Information			
1. Add Vehicle 2. I 2. Truck Description: Yea 3. Color Lice	Expire Vehiclewith Dec ar Make ense Tag #	al # Comp Model _ Truck #	any Employee _ <u>(</u> if applicable)
BX=Box CL=Claw FB=Flatbed PU=Pickup _ FL= Front Loader SL=Si	RO=Roll Off TR=	Trailer VN=Van _	
O			
Owner's Signature signifies that	t information was read and und	erstood	
Owner's Signature signifies that		erstood ATURE	
		ATURE	
	SIGNA For Office Use C	ATURE	
PRINT NAME	SIGNA For Office Use C	ATURE	
PRINT NAME Date Received	SIGNA For Office Use C	ATURE Only cal#	



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EMAIL: solidwaste.billing@brevardfl.gov

	Account #(For Office Use Only)								
CREDIT CARD AUTHORIZATION FORM A convenience fee of 2.95% or \$2.00 (whichever is greater) will be added.									
I hereby authorize the S	Solid Waste Management	Department to charg	e the credit ca	ard shown below:					
	□Security Deposit	☐ Roll-O	ff Permit						
☐ American Express	□ Discover Card	☐ Maste	erCard	□ Visa Card					
Card #:		Amou	ınt:						
Name on Card:									
Expiration Date:									
Billing Address:									
City:		State:	Zip:						
Business Phone:									
Cell Phone:									
Email Address:									
Authorized Signature: _			Date:						

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