



## Application for Commercial Account

Humboldt Waste Management Authority  
1059 West Hawthorne St. Eureka CA 95501  
Phone: (707) 268-8680 Email: [ar@hwma.net](mailto:ar@hwma.net)

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### Credit Policy

The following is the HWMA Credit Policy as approved by the Board of Directors. This policy statement serves as an agreement and **must be signed by a principal of your company** and returned to HWMA before an account can be opened.

1. **Invoices** – The customer will receive a scale ticket presented by Scale house personnel at the time of weighing out. Invoices will be delivered weekly via the email address on file.
2. **Statements** – HWMA will send customers a statement for their account at the beginning of the month. Payment of the full balance is due before the last day of the month in which the statement is generated.
3. **Payments** – Statement balance is due and payable before the last day of the month.
4. **Late Fees** – Late fees assessed to accounts not paid by the end of the month shall be charged a fee as specified by section 5b of the annually adopted integrated waste management fees.
5. **Duplicate Tickets** - Duplicate tickets will be provided at a fee specified by section 5d of the annually adopted integrated waste management fees per ticket to defray administration costs of finding past tickets. Requests for tickets over 180 days old will be billed per section 5d per hour for staff time researching past tickets.
6. **Past Due Accounts** – Accounts with balances 60 days in arrears will be locked pending payment in full. Notification will be made in writing on the statement.
7. **Permanent Closure** – Accounts locked for a second time for failure to pay will not be opened again for six months and will be subject to a full review of credit history.
8. **Credit Limits** – A credit limit will be determined when the account is opened. Credit limits may be changed but not exceeded. It is the customer’s responsibility to monitor their weight tickets and make interim payments if required.
9. **Password Protection** – For your protection, we advise that all charge accounts use a password to protect their account from fraudulent use. Please choose a password that only you and your employees would know.
10. **Collections** – The Authority may pursue legal remedies to collect accounts that are not paid.

### I agree to these terms.

Print Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signed: \_\_\_\_\_ Date: \_\_\_\_\_  
Must be signed by a principal of the company.

Company: \_\_\_\_\_



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Company: \_\_\_\_\_

Owner(s): \_\_\_\_\_

Telephone number: \_\_\_\_\_ Alternate telephone number: \_\_\_\_\_

Email address: \_\_\_\_\_

Billing address: \_\_\_\_\_  
\_\_\_\_\_

Physical address (if different): \_\_\_\_\_  
\_\_\_\_\_

Form of business: Corp \_\_\_\_\_ Partnership \_\_\_\_\_ LLC \_\_\_\_\_ Sole Proprietor \_\_\_\_\_

Business license: \_\_\_\_\_

Average monthly charges: \_\_\_\_\_

### Financial Information:

Bank: \_\_\_\_\_ Account #: \_\_\_\_\_

### Trade References:

1. \_\_\_\_\_ Email address: \_\_\_\_\_  
\_\_\_\_\_

2. \_\_\_\_\_ Email address: \_\_\_\_\_  
\_\_\_\_\_

3. \_\_\_\_\_ Email address: \_\_\_\_\_  
\_\_\_\_\_

Print Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Must be signed by a principal of company.

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### FOR OFFICE USE ONLY

Approved: \_\_\_\_\_ Date: \_\_\_\_\_

Account #: \_\_\_\_\_ Credit Limit: \_\_\_\_\_