

P.O. Box 97 Charles City, IA 50616 (641)228-3525 (800)232-3525 Fax: 641-257-6416

ACKNOWLEDGMENT OF NOTICE AND RELEASE

I,	, state that I have been advised by Jendro
Sanitation as to the proper use of a myself.	dumpster rented or received from Jendro Sanitation by
man-made surface, and/or any type empty or full, or the equipment bei	dvised, that if the dumpster is placed upon concrete, any other e of natural surface, that the weight of the dumpster itself, ing used to place or retrieve the dumpster may cause said rack or break or said natural surface to be dug up and/or sunk
responsibility of Jendro Sanitation. from any such damage. I further he	age caused as a result of the above will not be the I hereby release said Jendro Sanitation from any liability ereby state that I will indemnify and hold harmless the said caused to third parties as a result of the above.
I hereby certify that this load and any future load(s) do not contain any hazardous materials (paint, oil, chemicals, etc.), appliances, televisions, computer monitors, tires, yard waste, corrugated cardboard or animal carcasses.	
be assessed for any dumpster that i vary by size of dumpster.) Dumpst is over level full or any items picket	dvised by Jendro Sanitation that dumpster rental charges may is not dumped at least once every seven days. (Rental charges ters can only be LEVEL full. I agree that any dumpster that ed up around the dumpster will have an extra charge. I have a \$30.00 insufficient fund fee if my check is returned by the
	additional charges assessed by the FMC Landfill. Also, if the ster is rejected by the landfill, I agree to reimburse Jendro time at \$95.00 per hour.
ACKNOWLEDGED thi	s day
CUSTOMER SIGNATURE	CUSTOMER ADDRESS
SERVICE ADDRESS (If different than customer addre	DUMPSTER SIZE