

Service Agreement

Non-Hazardous Waste

OFFICE USE ONLY

New Business Ihopkins A36

Permanent

Account Number: 35611

Account Name Grand Panama Beach Resort COA, Inc Service Address 11800 & 11807 Front Beach Rd,
Service City: Panama City Beach, State: FLZip:32407
Tel # 850-235-7342

Contact Derek Gilber

Contact Derek Gilbert

Email derekg@rcamflorida.com

Billing Name Grand Panama Beach Resort COA, Inc
Billing Address 495 N Richard Jackson Blvd.
Billing City: Panama City Beach State: Zip:32407 Tel # 850-235-7342 Cell #
Contact Derek Gilbert
Billing Email <u>derekg@rcamflorida.com</u>
Auto Pay

SERVICE INFORMATION				SCHEDULE OF CHARGES					
Qty	Size	Туре	Freq	Min /Tons Included	Per Haul	Per Ton	Extra Lift	Container Charge	Monthly Base Rate
2	3	FL MSW	3 x per wk		\$0.00	\$0.00	\$65.00		\$1,053.00
Equipme	nt Delive	ry Date:	02 / 01 / 2024				Total Montl	hly: \$1	,053.00

Franchise Fee: \$0.00 DFF: \$0.00 Permit Fee: \$0.00	<u>Additional Service</u>		
Delivery Instructions:	Delivery:	\$ 0	
Compactor being rented by outside vendor.	Exchange:	\$ 0	
compactor semgrence by outside vendor.	Removals:	\$ 0	
Additional Information:	Relocate:	\$ 0	
Service to fluctuate due to seasonal changes. Proposed annual schedule attached.	Recovery Fee:	\$0.00	
(i) GRAND PANAMA FL P	Lock Install:	\$0	
	Mo Maint Fee:	\$ 0	
	Admin Fee:	\$ 0	
Trip Charge: \$: Olnactivity Fee: \$0 Per Day # Days: 0	Region:Panama City		

Customer Acceptance and Agreement: Customer has reviewed, understands, and accepts the specifications, prices, terms, and conditions of this Agreement, which are incorporated herein and made a part hereof. The individual signing this agreement on

Locks: No

Lids: No





Container Requirements: Wheels: Yes

behalf of Customer acknowledges that he/she has read and accepts the terms and conditions of this agreement which go with the service levels attached herein and that he/she has the authority to sign on behalf of Customer.

This agreement is for an initial term of 36 months from the effective date and it shall automatically renew thereafter for an additional 12months unless terminated as set forth herein. Please visit link below for Terms and Conditions of service.

Please visit <u>www.coastalwasteinc.com/terms-and-conditions</u> for terms and conditions.

02 / 19 / 2024	"Effective Date".		Customer agrees to pay ov	erweight/overlo	aded fees
Customer: Gra	ind Panama Bea	ich ResortiA	Coastal Waste & Recyclin	g Inc.	
Authorized Signatu	ure: <u>Manay Sto</u>	vall	Authorized Signature:	Lauren Hopkins	
Print Name: NA	NCY Stogall		Print Name: Lauren Hop	okins	
Title: Societa	Date:	9/24	Title: _Sales Executive	Date: _	01 / 16 / 2024





SITE HAZARD ASSESSMENT FORM

Blind alley / corner	No	Heavy Traffic	No	School Zone	No
Push or Pull/Please detail length in notes pelow	Yes	Low Wires	No	Special Approach required	No
Damaged Corral		Left Turn Entry require		Special PPE required	
	No	đ	No		No
Difficult approach	No	Parked vehicles Nearby	Yes	Special Training required	No
nclosure damaged	No	Pavement damage	Yes	Steep Grade	No
lectrical Panel Nearby	Yes	Pedestrian Traffic	Yes	Uneven surface	No
as Meter or Valve Nearby	No	Restricted Overhead- building	Yes	Other- Note Below	
Grease Container in Inclosure	No	Restricted Overhead- trees	No	NO SPECIAL HAZARDS NOTED	
Details of Above or Other Hazards Noted					

Photographs (Click in box below, click insert and select photo)

Actions Taken to Reduce Risk



SITE HAZARD ASSESSMENT FORM