



FORT YUMA INDIAN RESERVATION  
QUECHAN INDIAN TRIBE  
QUECHAN UTILITY COMPANY  
1888 SAN PASQUAL SCHOOL ROAD  
WINTERHAVEN, CA 92283  
PHONE: (760) 572-0667 FAX: (760) 572-3867

SCATTERED RESIDENTIAL (NON-SUBDIVISION) SERVICE FOR TRASH ONLY  
REQUEST AND AGREEMENT

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

Customer Name: \_\_\_\_\_ Account No: \_\_\_\_\_

Service Address: \_\_\_\_\_

Billing Address: \_\_\_\_\_

Email Address: \_\_\_\_\_ Inquiry Person Only: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Message/Inquiry Phone: \_\_\_\_\_

I hereby apply for trash and water and agree to pay the Quechan Utility Company. I agree to pay a charge of \$12.00 for trash and the total cost will be \$12.00 each month. **\*\*For new service I agree to pay a charge of \$36.00 for trash which covers the first 3 months.** The following documents are needed for my service to start or to be updated for my application to be complete: (1) State or Tribal ID card (2) Lease Agreement or Rent Receipt (3) Power (IID) Bill. **\*\* I understand if I fail to make the agreed upon payment that my trash containers will be picked up and the full payment will have to be paid before I can request for new trash containers or make a Payment Agreement for my Delinquent Account. I understand that it is my responsibility to inform the Quechan Utility Company of any changes of my mailing (Billing) address. Here are the following payments options.**

1. Pay your Bill or Service by calling (877) 556-3169
2. Mail your payment to Quechan Utility Company, P.O. Box 1899, Yuma, AZ 85366
3. If you would like to pay online you will need to register your account first at <https://QuechanUtilityCompany.secure.munibilling.com>

Have you or anyone in your household received services in the past 5 years? Yes or NO. I understand that the trash containers are not to be removed only used for the service address and I will report any damages immediately. I will provide a police report to wave the fee of \$50.00 for any damages or replacement. **\*\*No hazardous materials are to be placed in the containers or at any location provided by the Quechan Utility Company.\*\*** I understand that I will be responsible of all charges until I submit a written request detailing my request of my cancelling of service.

Customer Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Quechan Utility Staff Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Staff Use Only** New Customer \_\_\_\_\_ Current Customer \_\_\_\_\_ Has No Balance: \_\_\_\_\_ Past Due Balance: \_\_\_\_\_

This application will become a contract upon signature and is void after payment is paid in full.  
**EMAIL COMPLETED APPLICATION TO: [utilitiescoordinator@quechantribe.com](mailto:utilitiescoordinator@quechantribe.com)**