800 Main Ave SW (605)384-3641/384-5979 PO Box 1153 (605)384-5687 fax Wagner, SD 57380 www.yanktonsiouxtribe.net

**Business & Claims Committee:** 

## **B&CC Members:**

Robert Flying Hawk, **CHAIRMAN**Greg Cournoyer Jr.
Jason Cooke, **VICE CHAIRMAN**Andrea Fischer
Kenneth Cook, **TREASURER**Derrick Marks
Glenford "Sam" Sully, **SECRETARY**Kip Spotted Eagle

Jody Zephier

## Yankton Sioux Tribal Utilities Program Solid Waste Disposal Contract 2022

Ph: (605)384-5012 Fx: (605)384-5006

This Contract was agreed upon on the _	day of		
, between		and the	
Yankton Sioux Tribal Utilities Program:	P.O. Box 1153 Wagner, SD 57380.	According	
to this <b>CONTRACT</b> , the Solid Waste O	perator will maintain the following:	YSTUP will	
collect residential solid waste once a week, at this residence for the period of one year:			
(physical address)		ontact phone	
# Weather may	alter the Solid Waste collection sched	dule. Please	
feel free to contact the YSTUP Office at the above number if you have any questions			
regarding pick-up times. The CUSTOMER will maintain the following as agreed upon			
by signing the <b>CONTRACT</b> : in consideration of the services provided, I,			
, ag	ree to pay a \$10.00 deposit for one co	ontainer	
provided by the YSTUP if the customer request additional plastic dumpsters this amount			
will apply to additional dumpsters. A monthly fee of \$25.00 will apply for the first			
dumpster and \$35.00 for (2) dumpsters. The Yankton Sioux Tribe Utilities Program will			
send an invoice to the above address; payment is due by the end of the billing month.			
Failure to make payments within 90 days will void this <b>CONTRACT</b> and your dumpster			
will be reclaimed by the program. Re-instatement of services will only be authorized			
after the bill is satisfied. Any damage to the dumpster will be assessed against the			
customer. Dumpsters cost \$75.00 each. (Note all payments made to the YST Finance			
Office by Check or Money Order).			

(Printed Name of Customer) Designee Signature)	(YST Manager or
(Mailing Address)	(How many cans)
DOB/	
(Signature of Customer)	(Delivery date)