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RECYCLING and REFUSE SERVICE AGREEMENT

CUSTOMER NAME			
Canton Sewer System			
CUSTOMER CONTACT			
Robert Skinner			
BILLING ADDRESS		SERVICE ADDRESS	
4 Market Street		Old River Rd	
Collinsville, CT 06022		Canton, CT 06019	
BILLING PHONE	PAINE'S REPRESENTATIVE	SERVICE PHONE	ACCOUNT NUMBER
860.693.2235	Robert Higley		119357000

1) TERMS:

Customer agrees to hire and hires Paine's Inc. (Contractor) to provide the equipment and services set forth below at the prices and the terms and conditions set forth in this Agreement. The terms of this Agreement shall be for a contract term of 3 years, commencing on 7/1/2014. Customer agrees to pay the fees listed in Sections (2) and (3) below, subject to renewal under Section (4) below and an annual cost-of-living increase not to exceed four percent (4%) per year. In addition, the Customer will pay the charges specified in Section (5) & (6). This Agreement and all amendments shall be binding on each parties' successors and assigns.

2) TYPE OF SERVICE / EQUIPMENT:

MATERIAL	NUMBER AND SIZE OF EQUIPMENT	FREQUENCY	SERVICE FEE	CURRENT DISPOSAL FEES	ADDITIONAL FEES
			<input checked="" type="checkbox"/> Monthly <input type="checkbox"/> 6 Months		
Trash	One 2 yard	Every Other Week	\$40.31	\$21.49	0
Single Stream	One 95 gallon	Every Other Week	\$26.52	0	0

3) SPECIAL INSTRUCTIONS:

4) AUTOMATIC RENEWAL:

The term of this Agreement shall be automatically renewed and continue in force for a three (3) year period after the expiring term set forth in Section 1, on the same terms and conditions set forth therein. Either party may cancel this Agreement, effective at the end of the first 3 year(s) by giving written notice of cancellation to the other party not less than sixty (60) days and not more than ninety (90) days prior to the end of the first 3 year(s) of the Agreement term.

"I acknowledge that this contract contains an AUTOMATIC RENEWAL provision."

X <u>[Signature]</u> AUTHORIZED CUSTOMER SIGNATURE	X <u>Robert H Skinner, CAO</u> PRINTED NAME AND TITLE	X <u>7-23-14</u> DATE
X <u>[Signature]</u> PAINE'S INC. SALES REPRESENTATIVE SIGNATURE	X <u>Bonish H. Fernandez Sales</u> PRINTED NAME AND TITLE	X <u>8-6-14</u> DATE
X <u>[Signature]</u> PAINE'S INC. CORPORATE SIGNATURE	X <u>Michael R Paine Sr. President</u> PRINTED NAME AND TITLE	X <u>8-6-14</u> DATE

MY SIGNATURE ABOVE ACKNOWLEDGES MY RECEIPT AND UNDERSTANDING OF THE ABOVE AUTOMATIC RENEWAL PROVISION AND INDICATES THAT I HAVE READ AND AGREE TO ALL THE TERMS AND CONDITIONS ON BOTH SIDES OF THIS AGREEMENT.