



## APPLICATION FOR SERVICE

Service location \_\_\_\_\_ Date Service to start \_\_\_\_\_

Person/People Responsible for bill payment:

Name \_\_\_\_\_ (Renting) SS# \_\_\_\_\_ Phone# \_\_\_\_\_

Name \_\_\_\_\_ (Renting) SS# \_\_\_\_\_ Phone# \_\_\_\_\_

Email: \_\_\_\_\_

Own \_\_\_ Renting \_\_\_ Landlord: \_\_\_\_\_

Pets: Yes \_\_\_ No \_\_\_

(Please register your animals)

Mailing Address if different from service location:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Nearest Relative Name, Address and Phone#:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Permission to Contact:** I consent to receive telephone calls and email messages from the City of Pleasantville, and any business associates with which the City of Pleasantville has contracted, at the phone number(s), so that the City of Pleasantville and its business associates may provide Utility information, service my account, and/or collect any amounts owed for this/these services provided.

Signature: \_\_\_\_\_

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