



Town of Collierville Water • Sewer • Refuse Service Agreement

Effective Date _____

COPY OF DRIVERS LICENSE, CLOSING PAPERS OR LEASE AGREEMENT AND A NONREFUNDABLE FEE OF \$25.00 IS REQUIRED FOR WATER/SEWER SERVICE. AN ADDITIONAL NONREFUNDABLE SANITATION ESTABLISHMENT FEE OF \$55.00 PER TRASH CART IS REQUIRED. IF RENTING OR CLOSING PAPERS ARE NOT FURNISHED, A REFUNDABLE DEPOSIT OF \$75.00 IS ALSO REQUIRED.

APPLICANT LAST NAME _____ FIRST _____ M.I. _____ HOME # _____ CELL # _____

SERVICE ADDRESS _____ CITY _____ STATE _____ ZIP CODE _____

MAILING ADDRESS (if different) _____ CITY _____ STATE _____ ZIP CODE _____

SOCIAL SECURITY NUMBER _____ DRIVER LICENSE NO. _____ STATE _____ DATE OF BIRTH _____

PLACE OF EMPLOYMENT _____ WK. PHONE NO. (_____) _____

BUSINESS ADDRESS _____ JOB TITLE _____

SPOUSE NAME _____ EMPLOYED BY _____

BUSINESS ADDRESS _____ JOB TITLE _____

SPOUSE SOC. SECURITY NUMBER _____ WK. PHONE NO. (_____) _____

SPOUSE CELL PHONE NUMBER (_____) _____

HAVE YOU LIVED IN COLLIERVILLE OR **SHELBY COUNTY** BEFORE? YES _____ NO _____

IF YES, WHAT WAS YOUR PREVIOUS ADDRESS _____

ADDRESS _____ FROM _____ (DATE) TO _____ (DATE)

AT THE NEW SERVICE ADDRESS, DO YOU OWN? _____ RENT? FROM _____ (DATE) TO _____ (DATE)

IF RENTAL, WHAT IS THE NAME AND ADDRESS OF YOUR LANDLORD? _____

_____ PHONE NO. (_____) _____

NEAREST RELATIVE'S NAME _____ PHONE NO. (_____) _____

ADDRESS _____ CELL NO. (_____) _____

CITY _____

The undersigned hereby makes application of utility service(s) and agrees to pay for said service(s) as measured by Town of Collierville Public Utilities metering devices in accordance with the applicable rates and charges as specified in the Town's rate schedule for above address and any other location that may be incurred as a result of a request to transfer the account until the Town of Collierville receives a request to discontinue the services or discontinues the service due to failure to comply to this agreement. The customer agrees to allow right of access to Town of Collierville Public Utilities agents on the customers premises at all reasonable times and for necessary purposes. I/we assume responsibility for service beginning from connection date or until the Town of Collierville is notified of cancellation of service, that all billings rendered by said company shall be due and payable upon receipt. Failure to receive a bill does not release a customer from payment obligations. The customer shall pay all collection expenses or attorney fees due to default or failure to perform the obligations incurred as set forth in this agreement. It is agreed by the customer and the Town that this contract shall apply to the original address of the customer. Information submitted to the Town of Collierville in this service agreement is correct and true to the best of my knowledge and belief.

APPLICANT'S SIGNATURE / DATE _____

JOINT APPLICANT'S SIGNATURE / DATE _____

APPROVAL _____ DATE _____

FOR OFFICE USE ONLY	
DATE _____	CARRIER# _____ CHECKED BY: _____
TRANS. ACCT.# _____	NEW ACCT.# _____

Cart Serial Number: _____ NUMBER OF TRASH CARTS REQUESTED: _____ New Home _____
1. _____ Number of Recycle Bins _____ Existing Cart _____
2. _____ Date Delivered: _____
3. _____ Delivered from Transfer Station Public Services Personnel: _____

Providing your Social Security number is not required; however, not providing a Social Security number will result in a deposit. Should you decide to provide your Social Security number, the Town of Collierville Public Utilities will use your Social Security number to verify credit records and to aid in collecting delinquent payments.

Providing your spouse's Social Security number is not mandatory and will have no effect on the amount of your deposit. If you choose to provide your spouse's Social Security number, the Town of Collierville will use your Spouse's Social Security number to verify credit records and to aid in collecting delinquent payments.