

CITY OF HAZEN  
CUSTOMER APPLICATION CARD

Date Service to Begin \_\_\_\_\_

Acct. No \_\_\_\_\_

Name (Print) \_\_\_\_\_  
(Last) (First) (Middle Initial)

Service Address \_\_\_\_\_  
(Number) (Street) (4-Digit Zip)

Mailing Address (If Different) \_\_\_\_\_

Other Adult Occupant's Name \_\_\_\_\_

Personal Phone No \_\_\_\_\_

Other Contact No \_\_\_\_\_

IF RENTING, Landlord's Name \_\_\_\_\_ City \_\_\_\_\_

IF BUYING, Previous Resident \_\_\_\_\_ Purchase Date \_\_\_\_\_

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

Security Deposit **(\$125.00)** Date Paid \_\_\_\_\_ Receipt No \_\_\_\_\_

Garbage Container No \_\_\_\_\_ Day of Pickup \_\_\_\_\_