

EAST FRANKLIN TOWNSHIP

APPLICATION AND AGREEMENT FOR SANITARY SEWER SERVICE
(Applicable to all classes of service)

Customer Account No. _____

INSTRUCTIONS

PLEASE PRINT. Complete the entire agreement. "Applicant" is each adult person who will receive the benefit of service at the premises described. If the household includes a husband and wife or two persons living together, the names of both persons must be provided, including wife's maiden name. Each applicant agrees to be jointly and severally liable for the bills rendered for service as a result of this application. It is understood that the rates, terms, rules and regulations applicable to the service supplied hereunder are set forth in the Township's rates and regulations, as may be published from time to time and are made part of this application. This application constitutes an agreement between the applicant and the Township for sanitary sewerage service to be provided by East Franklin Township.

1. APPLICANTS TO BE BILLED	Name (First, Initial / or maiden /, Last)	Social Security Number
	Name (First, Initial / or maiden /, Last)	Social Security Number
	Name (First, Initial / or maiden /, Last)	Social Security Number
	Service Address	
	Mailing Address	Phone No. (include Area Code)
2. PREMISES	<input type="checkbox"/> Owned <input type="checkbox"/> Rented	Municipality
3. LANDLORD, OWNER OR RENTAL AGENCY	Name	Length of Lease
	Address (Street, City, Zip Code)	Phone No. (include Area Code)
4. YOUR FORMER RESIDENCE	Address (Street, City, Zip Code)	Phone No. (include Area Code)
	Previous Landlord	Phone No. (include Area Code)
5. IF EMPLOYED	Employer's Name	
	Address (Street, City, Zip Code)	Phone No. (include Area Code)
6. IF UNEMPLOYED	Source of Income	Caseworker (if applicable)
7. IDENTIFICATION	Driver's License No.	Medical Card ID

Applicants acknowledge they have read the above application, understand it, have made truthful answers thereon, are jointly and severally bound for service rendered by the Township.

8. SIGNATURES	Applicant	Applicant	Applicant
	Date	Date	Date

When application is made by someone other than the owner, the owner shall co-sign the application and shall guarantee payment for service.

Landlord Signature

Date

Township Representative

Date

Landlord Identification