



# CITY OF TOLLESON

9555 West Van Buren • Tolleson, AZ 85353 • 623.936.7111 • fax 623.936.7117

## REQUIRED INFORMATION FOR UTILITY SERVICES / TRASH / SEWER

### ALL APPLICANTS MUST SUBMIT A COPY OF THEIR STATE ISSUED PICTURE ID AND \$120 DEPOSIT

- OWNERS** MUST SUBMIT PROOF OF OWNERSHIP SUCH AS: PROPERTY DEED, SIGNED LOAN CLOSING DOCUMENTS OR SIGNED/ CERTIFIED SETTLEMENT STATEMENT ACCOMPANIED WITH A COPY OF EARNEST OR DEPOSIT CHECK
- RENTERS** MUST PROVIDE A SIGNED COPY OF THEIR RENTAL OR LEASE AGREEMENT AND OWNER MUST HAVE A CITY OF TOLLESON BUSINESS LICENSE
- MGMT CO AND LISTING AGENTS** WILL BE REQUIRED TO PROVIDE A COPY OF THEIR CONTRACT WITH THE OWNER

\*\*\* ALL DOCUMENTS PROVIDED ARE SUBJECT TO REVIEW FOR ACCEPTANCE APPROVAL \*\*\*

### APPLICANT INFORMATION

NAME: \_\_\_\_\_ DATE: \_\_\_\_\_  
 SERVICE ADDRESS: \_\_\_\_\_ TOLLESON, AZ 85353  
 MAILING ADDRESS: \_\_\_\_\_  
 HOME# \_\_\_\_\_ CELL# \_\_\_\_\_ EMAIL \_\_\_\_\_  
 SANITATION MONTHLY FEE IS \$15: INCLUDES 1 TRASH & 1 RECYCLE CONTAINER (REQUIRED).  
 ADDITIONAL CONTAINERS REQUESTED: TRASH \_\_\_\_\_ RECYCLE \_\_\_\_\_ (EACH ADDITIONAL CONTAINER IS \$7.50/MONTH).

### OWNER / MANAGEMENT INFORMATION

OWNER WILL LIVE AT THIS PROPERTY IF NOT:  REGISTERED RENTAL PROPERTY  COT BUS LIC# \_\_\_\_\_  
 OWNER'S NAME: \_\_\_\_\_ CONTACT# \_\_\_\_\_  
 ADDRESS: \_\_\_\_\_ EMAIL \_\_\_\_\_  
 PROPERTY MANAGEMENT CO., REALTOR, OR BROKER IF RENTING / LEASING:  REGISTERED RENTAL PROPERTY  
 MGMT CO NAME: \_\_\_\_\_ CONTACT# \_\_\_\_\_  
 ADDRESS: \_\_\_\_\_ EMAIL \_\_\_\_\_

### APPLICANT SIGNATURE

UNDER PENALTIES OF PERJURY, I DECLARE THAT TO THE BEST OF MY KNOWLEDGE AND BELIEF THE INFORMATION STATED ABOVE IS TRUE, CORRECT, AND COMPLETE. IN ADDITION YOUR SIGNATURE AUTHORIZES US TO RELEASE YOUR ACCOUNT BALANCE TO THE PROPERTY OWNER OR THEIR REPRESENTATIVE. NOTIFICATION OF SIGNED SERVICE APPLICATION WILL BE THE RESPONSIBILITY OF THE PERSON USING THE WATER ACCOUNT THAT IS STATED ABOVE. IT IS AGREED THAT THE ABOVE WATER USER WILL BE RESPONSIBLE FOR ALL UTILITY CHARGES INCURRED UNTIL THE CITY OF TOLLESON IS NOTIFIED IN WRITING TO TERMINATE SERVICES.

APPLICANT SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

### FOR OFFICE USE ONLY

SANITATION: Work Order# \_\_\_\_\_ Sent on \_\_\_\_ / \_\_\_\_ / \_\_\_\_ @ \_\_\_\_ AM / PM  
 METER: TURN ON & READ Work Order# \_\_\_\_\_ Sent on \_\_\_\_ / \_\_\_\_ / \_\_\_\_ @ \_\_\_\_ AM / PM  
 Previous Applicant: \_\_\_\_\_ Previous Account # \_\_\_\_\_  
 New Account # \_\_\_\_\_ New Service Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
 Photo ID  Verify Registered Rental Property  Lease / Rental Agreement  Verify Ownership Documents  
 Verify Current Business License \_\_\_\_\_ DEPOSIT Receipt # \_\_\_\_\_ COMPLETED BY \_\_\_\_\_