

Garbage Account Registration • Update



	Account Number			Date		
Re	egister New Account	Update/Reactivate	Close/S	Close/Suspend Account		
	Date Requested for New Service	c e	Reasor	n for Change		
Property Owner		Property Address				
Mailing Address			Port Vue	PA	15133	
	(City) (State)	Tenant Name(s)				
Phone		Move in/out date				
Driver's Licence or Photo ID #		Phone				
	(Signature)		(Print Name)	·)		
		ail Completed Form to:				
		mine Ave • Port Vue PA 15133 Fax: (412) 664-6345	3			
	For Off	FICIAL USE BY BOROUGH AUTHORITY		Waive		
(Quar	rter to begin/reactivate service)	(Quarter to	to end/suspend service)			
(Effective Date)			(Approved by)			