



<b>Office Use Only</b>	
Customer Name:	_____
Account #	_____
Staff Name & Date:	

**Application for Commercial Utility Account**

*Return the completed application to Finance Department, City Hall  
1339 Griffin Avenue, Enumclaw, WA 98022 Phone: 360 825-3591 Fax: 360 825-1429*

Business Name:	
Phone:	Fax:
After Hours Contact Phone:	
Email Address:	
Driver's License #:	
Effective Date of Service:	
Mailing Address:	Service Address:
Owner <input type="checkbox"/> Renter <input type="checkbox"/>	Owner/President, Address & Phone:
<i>If renter, provide owner's name, address &amp; phone #</i>	
Previous Utility Customer with the City?	Emergency Contact (name and phone #):
<i>If yes, list addresses and dates:</i>	
<p align="center"><i>Garbage service is offered only to businesses within the city limits. Please indicate the level of service desired:</i></p> <p align="center"><input type="checkbox"/> 20 gal mini-can <input type="checkbox"/> 32 gal can <input type="checkbox"/> 96 gal wheeled cart <input type="checkbox"/> 1.5 cu yd dumpster</p> <p align="center"><b>Customer is responsible for providing own garbage cans; City provides carts and dumpsters.</b></p>	
<p align="center"><i>Recycling bins are provided to City residents at no charge with pick-up every other week. Yard waste pick-up is available on alternate weeks for a charge of \$8.22 per month.</i></p> <p align="center">Please indicate if you would like this service.    Yes <input type="checkbox"/> No <input type="checkbox"/></p>	
I certify that the above information is true and correct to the best of my knowledge.	
Signature:	Date:    /    /