

## Application for Service

\_\_\_\_\_  
Full Legal Name

\_\_\_\_\_  
Date of Birth

\_\_\_\_\_  
Physical Address

\_\_\_\_\_  
Billing Address

Own  Rent

\_\_\_\_\_  
Landlord's Name

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
SS Number

\_\_\_\_\_  
Drivers License # & State

\_\_\_\_\_  
Phone Number/Cell

\_\_\_\_\_  
Employer's Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
Phone Number

### CO-APPLICANT

\_\_\_\_\_  
Full Legal Name

\_\_\_\_\_  
Date of Birth

\_\_\_\_\_  
SS Number

\_\_\_\_\_  
Drivers License # & State

\_\_\_\_\_  
Phone Number/Cell

\_\_\_\_\_  
Employer's Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
Phone Number

## 95 GALLON GARBAGE CART AGREEMENT

FOR OFFICE USE ONLY

ACCOUNT # \_\_\_\_\_ CART SERIAL NUMBER(S) \_\_\_\_\_

I, \_\_\_\_\_, do hereby request that the City of Hartford provide \_\_\_\_\_ 95 gallon garbage cart(s) to be utilized at \_\_\_\_\_

\_\_\_\_\_. One cart is provided per household or business. If more carts are needed, I agree to pay \$52.00 per cart plus the monthly rate of \$6.00 per additional cart. I understand that all garbage must be placed in cart(s) and the cart(s) must be placed at curbside for pickup.

It is hereby agreed and understood I am responsible for cart(s). If cart breaks through normal use, the City will repair or replace it at no cost to me. The City is not responsible for repair or replacement of the container when it is lost, stolen or damaged because of customer abuse or neglect. The cost to replace the cart is \$52.00.

It is further understood that said cart(s) is the property of the City of Hartford. Each cart is numbered and assigned to a specific address. If you move, the cart must stay at the current address. If the cart is removed from the assigned address, the cost will be deducted from the utility deposit on file.

