| Originai | re | quest | |
|----------|----|-------|--|
| | | | |
| | | | |

| □ Updated billing information GARBAGE | | | | | |
|--|--|---|--|--|--|
| | Change of Ownership/Billing Form | n | | | |
| Please complete the following | ng form to ensure the proper transfer of service and billing for | your Crescent Township garbage | | | |
| | | | | | |
| Effective Date: | | | | | |
| Property Owner's Name: | | | | | |
| Contact Number: | | | | | |
| | | | | | |
| | SERVICE ADDRESS | | | | |
| | | | | | |
| Address: | CRESCENT, PA | 15046 | | | |
| Parcel ID#: | - | | | | |
| (| | | | | |
| | BILLING ADDRESS | | | | |
| ☐ Same as listed above | | | | | |
| ☐ Different billing address | (complete information below) | | | | |
| Ç | | | | | |
| Address: | | | | | |
| City: | State: Zip Code: | | | | |
| | | | | | |
| Jordan Tax Service. §640.07: The failure to occupant(s) of the duty | Payment should be submitted directly to receive a bill for collection and disposal charge to pay said charges as the benefit of collection r(s) and occupant(s) of real property which is su | o them. es shall not relieve the owner(s) or and disposal of solid waste | | | |
| fee, and keeping my billing information u | and accurate. I am aware as an owner of the property listed a up to date. In the event my property becomes vacant for an ex I must notify the Township in writing immediately. Visit www.notify the Township in writing immediately. | tended period of time, and wish for a | | | |
| Signature of Property Owner: | | Date: | | | |
| Γ | | 7 | | | |

SUBMIT COMPLETED FORM TO:

<u>Fax</u>: 724.457.2045

Email: in fo@crescent township.com

Mail: Crescent Township

225 Spring Run Road Crescent, PA 15046