

Town of Hillrose Utility Account Application

I, _____ do hereby
(Print applicant's name above)

make application for Water / Sewer / Trash service from the
Town of Hillrose at the following service address:

Beginning on _____.

Legal Owner of Property:

Mailing Address: _____

Home Phone: _____

Work Phone: _____

Trash service is requested as:

Weekly

Senior Bi-Weekly

Shared Weekly

I affirm that the information given above is correct.

(Sign application here)