

Serafine Hauling LLC
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East Butler Borough Enrollment Form

All customers must **return this form** with their first payment, or complete the electronic form on our website at <https://serafinehauling.com/>

Section 1: ACCOUNT INFORMATION

Customer Information:

Print Customer Name: _____

Service Address: _____

Billing Address (**if different**): _____

City: _____ State: _____ Zip: _____

Phone #: _____ Email Address: _____

Section 2: SERVICE

All customers will receive **regular service** unless otherwise requested below.

- I am **eligible** and will be utilizing the **senior citizen sticker program**.
 - I wish to utilize a **Serafine Hauling LLC 95 gallon trash cart** at an additional rate of \$6/quarter.
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Section 3: BILLING

- I want to enroll in paperless billing to receive my invoices via email.**

Please be sure to write your email address above.

- I want to enroll to continue to receive my invoices by mail.**
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Section 3: AUTO-PAYMENT

- I want to enroll in optional auto-payment. My payment information is written below.**
- I do NOT want to enroll in auto-payment.** (skip remainder of section)

ACH PAYMENTS

Bank Account Information:

Name on Account: _____

Name of Financial Institution: _____ Checking Savings

Routing Number: _____ Account Number: _____

