## Serafine Hauling LLC PO Box 597 Slippery Rock, PA 16057

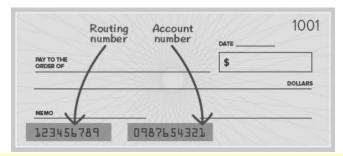
724-445-7488 www.serafinehauling.com serafinehaulingllc@gmail.com



# East Butler Borough Enrollment Form

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

		Section 1: ACCOUNT	INFORMATION
<b>Customer Inform</b>	ation:		
Print Customer N	ame:		
Service Address: _			
Billina Address <b>(if</b>	different):		
		State:	
DI "	_		·
Phone #:	Email Add	dress:	
			tion 2: SERVICE
	_	rice unless otherwise reques	
_	_	nior citizen sticker program	
<ul><li>I wish to utilize</li></ul>	a <b>Serafine Hauling LLC 9</b>	<b>95 gallon trash cart</b> at an ac	lditional rate of
\$6/quarter.			
		Sec	tion 3: BILLING
□ I want to enroll	in paperless billing to re	eceive my invoices via <u>emo</u>	<u>nil</u> .
Please be s	sure to write your email a	ddress above.	
	to continue to receive n		
		<u> </u>	
		Section 3: A	UTO-PAYMENT
□ I want to enroll	in optional auto-payme	nt. My payment information	on is written
below.			
□ I do NOT want t	o enroll in auto-paymer	nt. (skip remainder of section	n)
			,
	ACH PA	<u>YMENTS</u>	
<b>Bank Account In</b>	formation:		
Name on Accoun	t:		
Name of Financia	l Institution:	Checking •	Savings 🛚
		count Number:	_



## PLEASE ATTACH I VOIDED CHECK PER ACCOUNT TO THIS FORM.

### **CREDIT CARD**

Credit Card Information:		
Credit Card #:	Expira	ation Date:/
Security Code:		
Cardholder's Information:		
Print Cardholder's Name:		
Billing Address (If it is different f	rom your addresses listed	d on the front page.)
By signing, I authorize Serafine I the account information provide	•	, ,
Print Name	Signature	Date

#### Terms:

- You have the option to change any of these at any time. Please contact the office to do so. You may also choose to update your information via the link found at <a href="https://serafinehauling.com/">https://serafinehauling.com/</a>.
- A fee of \$20 will be applied for returned payments.
- Please return this form to:

Serafine Hauling LLC

PO Box 597

Slippery Rock, PA, 16057

or email to: <a href="mailto:serafinehaulingllc@gmail.com">serafinehaulingllc@gmail.com</a>