

Serafine Hauling LLC
PO Box 597
Slippery Rock, PA 16057
724-445-7488
www.serafinehauling.com
serafinehaulingllc@gmail.com



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

ACCOUNT INFORMATION

Customer Information:

Print Customer Name: _____

Service Address: _____

Billing Address (if different): _____

City: _____ State: _____ Zip: _____

Phone #: _____ Email Address: _____

BILLING

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

My email address is: _____

I want to enroll to continue to receive my invoices by **mail**.

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.

Credit Card Information:

Credit Card #: _____ Expiration Date: ____/____

Security Code: _____

Cardholder's Information:

Print Cardholder's Name: _____

Billing Address (If different then above.) _____

By signing, I authorize Serafine Hauling LLC to initiate automatic payments using the account information provided above to satisfy my debts.

Print Name

Signature

Date

TRASH CARTS

All customers will receive (1) 95 gallon trash cart unless otherwise requested below.

- I wish to receive a 35 gallon trash cart INSTEAD of a 95 gallon trash cart.
 - I wish to add on an additional 95 gallon trash cart at a rate of \$15/month.
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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 <https://serafinehauling.com/sr-borough>.
- 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: serafinehaulingllc@gmail.com.