



Commercial / Residential Service

New Customer Information / PH: (775) 727-5587 / FAX: (775) 727-5832

Date: _____

Service Type: Joe's: Toilets / Hand Wash / Holding Tank / <u>Septic:</u> Residential/Commercial / Grease Trap / Jet <small>(Please Circle)</small> Nevada Site Services: Storage Box / Cleaning Services / Other _____
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Last Name _____ First _____

OR

Business Name _____ Tax ID# _____ - _____

Phone: H/W: _____ C: _____ SSN# _____ - _____ - _____

Driver License: State _____ ID# _____ DOB _____

Additional Account Contact if any (i.e. Spouse): _____

Landlord/Property Owner: _____ Phone: _____ Self-Owned

Service Address: _____ City: _____ State: _____ Zip: _____ Type of Building: Modular Home: (Single/Double/Triple) / House / Apartment / Other: _____ <small>(Please Circle)</small> Color: _____ Trim: _____ If house # is not posted, please provide additional info/description: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Customer Signature: _____ Date: _____

<input type="checkbox"/> E-Statements: Please check if you would like to have your statements emailed instead of mailed. _____ <small>(Please Initial)</small> Email Address: _____ <p style="text-align: center;">(Please print clearly)</p>
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Office Use Only

Service Type: _____ Service Day: M T W Th F Cross Street: _____

Payment Amount: \$ _____ Entered by: _____