

**Borough of
Ephrata**



*location
of choice*

124 S State Street, Ephrata, PA 17522
717-738-9222 / 717-733-4062 (Fax)
custserv@ephrataboro.org

APPLICATION FOR REFUSE COLLECTION SERVICE

I/We, _____, do herewith request participation in the Refuse collection contract through the Borough of Ephrata. I am requesting service for 1 residential dwelling unit (s) located at _____ where I am () a tenant or () the owner. This service shall be effective ___/___/___ and remain in effect until I terminate the same by returning my annual plate to the Borough Business Office. I understand that I am responsible for payment of the monthly fee of \$20.75 per dwelling unit and that this fee will be included in my utility bill commencing the first bill mailed after my service begins.

Signature

Daytime phone number

Date

Plate # _____

Received by _____

Date Rec'vd _____

Account # _____

Entered by _____

Date Entered _____