



Finance Department

Revenue Collections Division

Refuse Service Customer Intake Form

Date: _____

Order Taken By: _____

Customer No: _____

Service Address: _____

Parcel Number: _____ Location ID: _____

Property Owner: _____

D.B. A. _____ Property Transfer Date: _____

Complete the following to START your service:

Service Ordered by: _____ Start Date: _____
(Property Owner)

Refuse: Size of Cart (Circle choice): **13** gal; **20** gal; **32** gal; **64** gal; **96** gal

Recycling : _____

Send Bills to: _____

Mailing Address: Street: _____ Apt # _____
City: _____ State: _____ Zip Code: _____

Home Ph #: _____ Work Ph #: _____ Cell Ph #: _____

Social Security Number: _____ (or) Driver's License #: _____

Berkeley Business Lic. No. _____ (for commercial accounts only)

Complete the following to STOP your service:

Stop Ordered by: _____ Effective Date: _____

Forward Bills to: _____

Mailing Address: Street: _____ Apt # _____
City: _____ State: _____ Zip Code: _____

Home Ph #: _____ Work Ph #: _____ Cell Ph #: _____