



ACCOUNT NUMBER: \_\_\_\_\_

DATE WANTED: \_\_\_\_\_ BUYING / RENTING

DOCUMENTATION: \_\_\_\_\_

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

MAILING ADDRESS IF DIFFERENT:

\_\_\_\_\_

SS NUMBER: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_

ALT. PHONE NUMBER: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

\*\*E-BILLING \_\_\_\_\_ YES OR \_\_\_\_\_ NO

By signing below, I agree to allow the City of Munford to use this information for account setup. I understand that it is my responsibility to provide the City with current contact information. I agree that this information is current and correct to the best of my knowledge and, that I can be held responsible for giving false information to the fullest extent of the law.

**\*\* NOTE: BY SIGNING UP FOR E-BILLING YOU UNDERSTAND THAT YOU WILL NOT GET A PAPER BILL IN THE MAIL, THE E-MAIL COPY IS THE ONLY COPY THAT YOU WILL RECEIVE.**

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_