

VILLAGE OF HAZEL CREST  
3000 WEST 170<sup>TH</sup> PLACE  
HAZEL CREST, IL 60429  
708-335-9600  
MONDAY – FRIDAY 8:00AM – 5:PM

**WATER SERVICE/TRASH PICK-UP CREDIT APPLICATION**

Application is hereby made for water/sewer and garbage service at the following location:  
Application does not ensure service; all Village ordinances must be satisfied.

PROPERTY ADDRESS \_\_\_\_\_

Move-In Date \_\_\_\_\_

OWNER/RENTER OF PROPERTY: (Please Print)

Name \_\_\_\_\_

Previous Address: \_\_\_\_\_

Telephone Number \_\_\_\_\_

Social Security Number \_\_\_\_\_

Drivers License Number \_\_\_\_\_

Persons in Household:

Employers \_\_\_\_\_

Pre-School Age \_\_\_\_\_

Employers' Addresses \_\_\_\_\_

Grade School Age \_\_\_\_\_

\_\_\_\_\_

High School Age \_\_\_\_\_

Employers' Phone #'s ( ) ( ) \_\_\_\_\_

Other \_\_\_\_\_

Position Titles \_\_\_\_\_

Total # in Household \_\_\_\_\_

MORTGAGE HOLDER \_\_\_\_\_

Mortgage Holder Contact Person:

Address \_\_\_\_\_

Name \_\_\_\_\_

\_\_\_\_\_

Phone Number \_\_\_\_\_

Realtor \_\_\_\_\_

Loan Number \_\_\_\_\_

Firm Name \_\_\_\_\_ City \_\_\_\_\_

Date of Closing \_\_\_\_\_

I agree to pay for water and sewer service as the bills are rendered in accordance with the provisions of all Ordinances of the Village of Hazel Crest, applicable hereto.

APPLICANT'S SIGNATURE \_\_\_\_\_

Date \_\_\_\_\_

OWNER OF PROPERTY OTHER THAN ABOVE:

Name \_\_\_\_\_

Home Telephone # \_\_\_\_\_

Address \_\_\_\_\_

Work Telephone # \_\_\_\_\_

City \_\_\_\_\_

State/Zip \_\_\_\_\_

Renter Deposit

Amount Paid \_\_\_\_\_ Date Paid \_\_\_\_\_ Receipt # \_\_\_\_\_