## Mille Lacs Band of Ojibwe



## Change of Service Address for Waste Disposal Service

Applicant MLB Enrollment #		Co-Applicant Enrollment #	
Full Legal Name of Applicant	SSN	Date of Birth	Telephone #
			1
Full Legal Name of Co-Applicant	SSN	Date of Birth	Telephone #
Old Service Address City	_	State	Zip Code
New Service Address City		State	Zip Code
Week that the garbage can relocation is re	equested for:		
New Mailing Address City		State	Zip Code
<b>Service Conditions:</b>			
<ol> <li>The monthly charge for service of \$1 received. (Rates subject to change.)</li> <li>Customer is responsible for assuring and time of pick-up.</li> <li>Customer is responsible for requesting Public Works Department. A signed the Mille Lacs Band of Ojibwe Public terminating service for those customed. A signed change of service address of Public Works Department to have you for the event that the customer does not Lacs Band of Ojibwe Public Works Mille Lacs Band of Ojibwe Enrollment I certify that the above information is a Public Works to verify the information service conditions.</li> </ol>	ing termination of the request form for the request form for the request form for the request form such an outstand form must be compour can moved from the request of the request supply an accurate the request of the request supply an accurate the request supply and the request supply and the request supply and the request supply and the request supply an accurate the request supply and the request supply a	can is positioned at the end of heir service and return of their ermination of service must be ent. An updated mailing addresding balance; otherwise paymoleted and turned into the Millem one address to another. The rate mailing address, this appliance of information form to obtain the curate, and give permission.	f their driveway on the date  can to the Mille Lacs Band completed and turned into ess must be supplied when ent will be due in full. e Lacs Band of Ojibwe cation will serve as the Mille ain information from the
Applicant Signature Date	<del>Co-A</del>	pplicant Signature	 Date

<sup>\*</sup>Application will not be accepted without signature.