



City of Nelson Application for Sanitation Services

Date: _____

Name: _____

Mailing Address: _____

Service Address: _____

Home Telephone: _____

Work Telephone: _____

Email Address: _____

Other details to locate your home: _____

Date of Birth (For Senior Citizens Discount): _____

***NOTE** – It is your responsibility to notify the City if you move or wish to have your service disconnected. Failure to do so will result in accepting charges to your account.

Signature of Applicant

