

REQUEST FOR REFUSE AND SPECIAL SANITATION CREDIT ON MULTIPLE METERED RESIDENCES OR BUSINESSES

SERVICE ADDRESS OF PRIMARY METER <i>415 W Clinton St</i>	UTILITY ACCOUNT NO. (AS LISTED ON BILL) <i>5-01900-3</i>
SERVICE ADDRESS OF SECOND METER <i>415 1/2 W. Clinton St</i>	UTILITY ACCOUNT NO. (AS LISTED ON BILL) <i>5-01910-4</i>
EXACT LOCATION OF SECOND METER (Side of House, Garage, etc.) 	
NAME <i>Laura Dickendasher</i>	
ADDRESS <i>415 W Clinton AL 43545</i>	
CITY <i>Napoleon AL</i>	STATE <i>AL</i>
ZIP <i>43545</i>	PHONE <i>592-7908</i>
ARE YOU THE PROPERTY OWNER YES - <input checked="" type="checkbox"/> NO - <input type="checkbox"/>	PROPERTY CLASSIFICATION RESIDENTIAL - <input checked="" type="checkbox"/> BUSINESS - <input type="checkbox"/>
IF RESIDENTIAL, IS THIS A SINGLE FAMILY UNIT YES - <input type="checkbox"/> NO - <input checked="" type="checkbox"/> IF NO, LIST NO. OF UNITS <i>2</i>	IF BUSINESS, IS THIS A SINGLE BUSINESS, ONE LOCATION YES - <input type="checkbox"/> NO - <input type="checkbox"/> IF NO, LIST NO. OF UNITS _____
WAS THIS EVER A MULTI-FAMILY DWELLING YES - <input type="checkbox"/> NO - <input type="checkbox"/> IF YES, LAST DATE _____	WAS THIS EVER A MULTI-BUSINESS LOCATION YES - <input type="checkbox"/> NO - <input type="checkbox"/> IF YES, LAST DATE _____
PROVIDE DETAILED EXPLANATION FOR REQUESTED CREDIT: <i>A single family will be occupying this duplex The upper unit (415 1/2) will no longer be rented out.</i>	
I Herby Certify The Information Listed Above Is True And Correct To The Best Of My Knowledge: <i>Laura M. Dickendasher</i> <i>8/4/00</i>	
OWNER SIGNATURE	DATE
FOR BUILDING INSPECTION ONLY:	
Is Location Listed Correct: YES - <input checked="" type="checkbox"/> NO - <input type="checkbox"/>	
Is Unit Single Family and/or Single Business: YES - <input type="checkbox"/> NO - <input type="checkbox"/> ?	
Should Meter Credit Request Be Approved: YES - <input type="checkbox"/> NO - <input checked="" type="checkbox"/>	
LIST REASONS: <i>I would not recommend until electric + water meters are combined into one.</i>	
I Herby Certify The Information Listed Above Is Correct. <i>Scott N. Dammann</i> <i>10-30-00</i>	
BUILDING INSPECTOR	DATE
CITY MANAGER APPROVAL: YES - <input type="checkbox"/> NO - <input checked="" type="checkbox"/>	
<i>J. D. Pich</i>	<i>31 OCT 00</i>
CITY MANAGER	DATE
DATED FILED WITH FINANCE DIRECTOR <i>11 1 01 12000</i>	
DATE	INITIALS <i>[Signature]</i>