



CITY OF MAUMELLE
550 EDGEWOOD DRIVE, STE 590
MAUMELLE, AR 72113-6907

| |
|--|
| For Office Use Only Move Out Date: _____ Verified By: _____ _____ |
|--|

PHONE 501-851-2500
FAX 501-851-6738
www.maumelle.org

CITY SERVICES INFORMATION FORM
 (PLEASE PRINT)

| | |
|-----------------------|-------------------------|
| NAME (PRIMARY): _____ | NAME (SECONDARY): _____ |
| DATE OF BIRTH: _____ | DATE OF BIRTH: _____ |
| SOCIAL SEC #: _____ | SOCIAL SEC #: _____ |
| DRIVERS LIC #: _____ | DRIVERS LIC #: _____ |
| EMAIL: _____ | EMAIL: _____ |
| CELL PHONE: _____ | CELL PHONE: _____ |
| HOME PHONE: _____ | EMPLOYER: _____ |
| EMPLOYER: _____ | WORK PHONE: _____ |
| WORK PHONE: _____ | |

TYPE OF PROPERTY: OWN ____ RENT ____ (If renting, also complete renter information below) BUSINESS ____

SERVICE ADDRESS: _____

MAILING ADDRESS: _____

CLOSING DATE: _____ DATE MOVED IN: _____

RENTER INFORMATION:

PROPERTY OWNER: _____

OWNER'S ADDRESS: _____ PHONE: _____

LEASE DATE: _____ DATE MOVED IN: _____

Please provide us with a person outside of the home/business whom we may contact in case of emergency or other extenuating circumstance.

NAME: _____ PHONE: _____

ADDRESS: _____ RELATIONSHIP: _____

 CITY: _____

STATE: _____ ZIP: _____

Pursuant to the results of a special election before the voters of Maumelle, held on October 15, 1985, service charges for police and fire protection and street lighting are hereby established for residences, commercial establishments and industries within the city limits of Maumelle, Arkansas. This service charge is referred to as the Community Service Fee. In addition, the City of Maumelle operates the local sanitation department. You may or may not be required to pay for City Sanitation services. The fee(s) will be billed to you on a quarterly basis, in advance, March, June, September and December. Any questions should be directed to Accounting at 501-851-2500.

BY SIGNING THIS FORM, YOU AGREE TO BE RESPONSIBLE FOR THE FEES INCURRED DURING YOUR RESIDENCY IN MAUMELLE. IN THE EVENT YOU DO NOT PAY YOUR ACCOUNT, AS AGREED, YOU WILL BE RESPONSIBLE FOR ALL COSTS REQUIRED FOR COLLECTION OF THOSE FEES. THIS INCLUDES ALL COURT COSTS, SERVICES FEES, AND ALL OTHER FEES ASSOCIATED WITH COLLECTING ON YOUR ACCOUNT. YOU AGREE THE CITY OF MAUMELLE, OR ITS AGENT, MAY REQUEST INFORMATION FROM CREDIT REPORTING AGENCIES FOR ALL PURPOSES IT DEEMS NECESSARY TO COLLECT ON YOUR ACCOUNT.

SIGNATURE (PRIMARY): _____ DATE: _____

SIGNATURE (SECONDARY): _____ DATE: _____