

Account Information Update

You have indicated that you would like to submit your request for Handicap Back Door Trash pickup service.

Please help us establish the service by submitting the following information.

• Copy of Handicap placard issued by Collin County Tax assessor or of the Handicap License Plate (attach a photo)

Service Address _____

Name (Last Name, First Name)

Mailing Address (if different than service address)

Home Phone, Work Phone, and/or Cell Phone

E-mail Address

Driver's License (State & Number)_____

Signature_____Date _____

Please return this form along with all required documentation and photos to: The Town of Fairview **Utility Billing Department 372 Town Place** Fairview, TX 75069