

**WORKORDER TAKEN BY:**

**CURRENT DATE:**

**HILTON HEAD NO.1 PUBLIC SERVICE DISTRICT**

**P.O. Box 21264, Hilton Head Island, SC 29925**

**(843) 681-5525 Office      (843) 681-5052 Fax**

**Website: www.hhpsd.com**

**EMAIL ADDRESS**

**NEW CUSTOMER INFORMATION**

**TODAY'S DATE:** \_\_\_\_\_

**MOVE IN/OUT DATE:** \_\_\_\_\_

**ACCOUNT #:** \_\_\_\_\_

**LOCATION #:** \_\_\_\_\_

**CUSTOMER'S NAME:** \_\_\_\_\_

**SS#** \_\_\_\_\_

**SPOUSE'S NAME:** \_\_\_\_\_

**SS#** \_\_\_\_\_

**SERVICE ADDRESS:** \_\_\_\_\_

\_\_\_\_\_

**MAILING / FORWARDING ADDRESS:** \_\_\_\_\_

\_\_\_\_\_

**HOME PHONE** \_\_\_\_\_

**DEPOSIT:**      N/A      CASH \_\_\_\_\_      CHECK# \_\_\_\_\_

**CREDIT CARD #** \_\_\_\_\_      **EXP DATE** \_\_\_\_\_

**OWNER/PREVIOUS OWNER/LANDLORD OR RENTAL AGENT:**

**NAME:** \_\_\_\_\_

**ACCOUNT#** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**LOCATION#** \_\_\_\_\_

\_\_\_\_\_ **PHONE #** \_\_\_\_\_

\_\_\_\_\_  
**CUSTOMER'S SIGNATURE (OR AUTHORIZED REPRESENTATIVE)**

**ADDITIONAL COMMENTS:**