



# "The Place to Be"



City of Walton  
40 N Main St  
Walton, KY 41094

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Services Address: \_\_\_\_\_

Billing Address (if different than service address): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Primary Phone: \_\_\_\_\_ Alternate Phone: \_\_\_\_\_

Driver/Photo ID #: \_\_\_\_\_ Own: \_\_\_\_\_ Rent: \_\_\_\_\_ (Rental agreement required)

Email Address: \_\_\_\_\_

Swimming Pool: Yes \_\_\_\_\_ No \_\_\_\_\_

Account Number: \_\_\_\_\_

Signature: \_\_\_\_\_

\*\*\*\*\*

## OFFICE USE ONLY

Total Paid: \_\_\_\_\_

Cash: \_\_\_\_\_

Check: \_\_\_\_\_ (Check#: \_\_\_\_\_)

Clerk: \_\_\_\_\_