



BIG BEAR CITY

Community Services District

Date: _____ Cycle: 1 2 3 4 50 Account OP

Property Address: _____

Residential Commercial Trash Day: M T W TH F

Parcel (APN) Number: _____ Lot: _____ Block: _____ Tract: _____

BUYER

New Account Number: _____

Name on Title _____ Alt. Name on Title: _____

Mailing Address: _____

Telephone: _____ Alt. Phone: _____

Email Address: _____

SS# _____ Name: _____

Has Recycle Bin? Yes No New Recycle Bin? Yes No W.O. Cro

ESCROW

Escrow Company: _____ Escrow Phone : _____

Escrow File # : _____ Closing Date: _____

SELLER

Seller Account Number: _____ New Address

Name: _____ Telephone: _____

Mailing Address: _____

_____ Auto Pay? Yes No

FOR DISTRICT USE ONLY

Closing Read W.O.# : _____ Closing Read: _____ Prorate Water? Yes No

Welcome Letter Sent New Owner on Cro Date: _____

Escrow Verifications: _____ Employee: _____