



713 Mountain Avenue Portage, Pennsylvania 15946  
Phone (814) 736-3631 Fax (814) 736-3112

## REQUEST FOR DRIVER'S LICENSE

For identification and to confirm order placement please include or attach a copy or photo of your current driver's license with returned paperwork.

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

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

Service Address:

\_\_\_\_\_  
\_\_\_\_\_

I confirm that I am requesting service from Pro Disposal, Inc.

\_\_\_\_\_

Customer Signature

\_\_\_\_\_

Date