	PHONE: 954-973-6	732 FAX: 954-973-	6754 City Hall 48	00 West Copans Road Coconut Creek, FL
907 FLORIDA	<b>O</b> Complete this form	m <b>n</b> Include a	copy of your Lease g Agreement	Mail, fax, or bring in this application to Ci Hall with your copy of Lease or Closing Agreement with your deposit payment
Applicant In Application Date:	nformation		FOR OFFICE USE ON	Account No.:
Name of person requ	esting service:	(FIRST)		
Name to appear on b	illing:			
Name to appear on billing: Federal ID Number (Business Only):				, , , ,
Site Inform				
Service Address	:			
Billing Address: 🗌 (	Check here if same as abov Other)	re)		
				eck to receive E-Bill
Phone Number: (	)		Ch	eck to receive paper bill
Type of Servi	ce	Request Date to Tur	n on Water A	bout the Owner
Single Family		// 	NNNNNNN	ame:
Multi-Family		Your Relationship to	A	ddress:

## Number of Bays/Units:

Hydrant Commercial

Request Dat	e to Turn on Water	About the Owner	
/	/	Name:	
MO.	DAY YEAR	Address:	
Your Relatio	onship to This Property		
Owner	Builder		
Tenant	Managing Agent	Builder's Information	
		Check here if meter installation is required	
Supporting I	Documentation	Meter Size:	
E Fully Execut	ed Lease	<u>!</u>	
Fully Execut	ed Closing Disclosure		

## **Security Deposit Information**

This deposit and any additional deposit that will be required shall constitute a guarantee that all sums due the City for furnishing water and/or sewer services are fully paid. The City shall, upon permanent disconnection of water services, refund any deposit remaining after deducting all amounts due the City for such services. Furthermore, the deposit shall not preclude the City from discontinuing for non-payment any and all services regardless of the sufficiency of the deposit to cover such indebtedness.

I understand that any unpaid balances after termination of service is subject to additional costs related to collection of monies, including attorney's fees, owed to the City of Coconut Creek.

The account holder is responsible for contacting the City either by telephone or in writing to close their water/sewer account.

I hereby request that the City of Coconut Creek furnish water and wastewater (sewer) service to the premises until notification of permanent termination of service.

Date:

## **Deposit Payment Options**

Cash (Do not mail in this form with cash. Please come into City Hall for this option.)

Check No.

Credit Card