



**APPLICATION FOR UTILITY SERVICE(S)**

DATE/TIME RECEIVED: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

OLD ACCT #: \_\_\_\_\_

WATER ON / OFF / NO METER: \_\_\_\_\_

NEW ACCT. #: \_\_\_\_\_

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

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

MAILING ADDRESS: \_\_\_\_\_

*(If different from service address)*

SOCIAL SECURITY / TAX ID #: \_\_\_\_\_

DRIVER'S LICENSE #: \_\_\_\_\_

TELEPHONE. NO: (\_\_\_\_) \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

DRIVER'S LICENSE #.: \_\_\_\_\_

TYPE OF BUSINESS: \_\_\_\_\_

SETUP DATE: \_\_\_\_\_

OCCUPATIONAL LICENSE #: \_\_\_\_\_

CHECK ONE: I am (1) Renting the property (2) Owner of the property

Property Owner's Name: \_\_\_\_\_

Property Owner's Mailing Address: \_\_\_\_\_

Property Owner's Telephone #: (\_\_\_\_) \_\_\_\_\_

Owner's E-MAIL: \_\_\_\_\_

\* I am aware that an additional deposit will be required if my water is turned off for nonpayment or a returned check (*applicant's initial please*) \_\_\_\_\_.

\* I am aware that it is the policy of the City Council not to consider or grant any after-the-fact variance of the City of North Miami building and zoning requirements for any construction or installation work which is done without a City of North Miami Building Permit in violation of such requirements, unless the unlawful construction or installation is first removed at the owner's expense.

I AGREE TO ABIDE BY THE RULES AND REGULATIONS ESTABLISHED BY THE CITY ORDINANCES AND OFFICE POLICIES OF THE NORTH MIAMI WATER DEPARTMENT AS ESTABLISHED AND/OR AMENDED HAVE BEEN INFORMED OF ANY OUTSTANDING BALANCES DUE.

X \_\_\_\_\_  
*Applicant Signature*

**FOR FINANCE USE ONLY**

CITY FOLIO NO./LIENS: \_\_\_\_\_

DEPOSIT REQUIRED: \_\_\_\_\_

CURRENT BALANCES: \_\_\_\_\_ + FINAL BILL

SERVICE CHARGES PD: \_\_\_\_\_

CUSTOMER #: \_\_\_\_\_

TAKEN BY: \_\_\_\_\_