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# The City of Neptune Beach

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116 First Street, Neptune Beach, FL 32266  
904-270-2400 FAX 904-270-2417  
Application for Water, Sewer, Garbage and  
Recycling Service

Account Name \_\_\_\_\_,  
(Last) (First) (Middle)

Business Name \_\_\_\_\_

New Service Address \_\_\_\_\_, City \_\_\_\_\_

Mailing Address \_\_\_\_\_, City \_\_\_\_\_  
(If different from service address)

Owner \_\_\_\_\_ Renter \_\_\_\_\_ Please bill \$25.00 connection fee to my account \_\_\_\_\_

Desired TURN ON DATE \_\_\_\_\_ (Please allow access to meter)

Driver=s License # \_\_\_\_\_ State \_\_\_\_\_ Date of Birth \_\_\_\_\_

Social Security # \_\_\_\_\_ Home Telephone # \_\_\_\_\_

Employer \_\_\_\_\_ Work Telephone # \_\_\_\_\_

Other Adults in Household \_\_\_\_\_

AI hereby make application to the City of Neptune Beach, Florida for utility service to be supplied at the address herein described, and upon the approval of said application, agree to abide by all ordinances, provisions and applicable rules of the City in regard to its service of the utility system, and agree to pay for such service in accordance with rates and regulations in effect at the time of delivery. I will be personally responsible for the payment of utility bills rendered as a result of this application.≡

DATE \_\_\_\_\_ SIGNED \_\_\_\_\_

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ACCOUNT # \_\_\_\_\_

If mailing or using fax, please attach a photocopy of picture identification. (utility.app)

## TO STOP SERVICE

Date to Disconnect \_\_\_\_\_ Account # \_\_\_\_\_

Account Name \_\_\_\_\_

Driver=s License # \_\_\_\_\_ State \_\_\_\_\_

Social Security # \_\_\_\_\_

Service Address \_\_\_\_\_

Mailing Address \_\_\_\_\_  
(If different from service address)

Forwarding Address \_\_\_\_\_

Owner \_\_\_\_\_ Renter \_\_\_\_\_