



City of Callaway Utility Billing Department

6601 E Hwy 22 * Callaway, FL 32404 * Telephone (850) 871-6000 * Fax (850) 871-2444

www.cityofcallaway.com

To apply for water/sewer/solid waste service this application must be completed and notarized. The original notarized form must be submitted with a personal check, cashier's check, cash or money order in the amount of \$260 to cover the two-hundred fifty dollar deposit and ten dollar non-refundable account charge along with a legible copy of applicant's photo id and lease agreement, proof of purchase or realtor's agreement for service address. An additional deposit of (\$40.00) is required for standard irrigation meters. We will attempt to connect your water service same day before 3:00PM not guaranteed and no week-ends or holidays service.

CUSTOMER SERVICE APPLICATION

PLEASE PRINT OR TYPE

Primary Account Name _____
Last First Middle

Secondary Account Name _____
Last First Middle

SERVICE ADDRESS: _____

MAILING ADDRESS: _____
(If different than service address)

City State Zip Code

Drivers License: _____
State Number

Date of Birth: _____ Primary Phone # _____

Secondary Phone # _____ Email Address: _____

Employment: _____

Date for Service to Begin: _____

Check one (1) box below:

Unlock Meter Only OR Turn on Meter

You must select one of the above options.

Read statement below, sign and date application

I, the undersigned applicant, for water/sewer/solid waste service state that the information provided on this application is true and correct to the best of my knowledge. I understand services start per purchase date or lease commence date unless otherwise stated on legal documented agreement. I understand that all charges are due as billed and accept total responsibility for payment of all charges incurred for the services provided, including reasonable attorney's fees and costs incurred for collection of the unpaid balance. I am also responsible for any damages done to any meters at this location by me or anyone else. I consent that water services provided at the service location may be turned on without applicant or applicant's representatives present. Applicant further agrees to hold the City of Callaway and its employees HARMLESS of authorizations made on behalf of account holder or a secondary account holder and or should the property, building(s) or premises incur damage as a result of water connection.

DATE: _____ APPLICANTS' SIGNATURE: _____

DATE: _____ SECONDARY APPLICANTS' SIGNATURE: _____

***Attached hereto is my (check one) _____ proof of ownership, _____ lease agreement, _____ Sales agreement, _____ signed Realtor's listing.

Also attached is a legible copy of valid id (check one) _____ driver's license, _____ military id, _____ state id. ***

Sworn to and subscribed before me this _____ day of _____ 20____, by _____, who is personally known to me or who has produced _____ as identification and who did/did not taken an oath.

NOTARY PUBLIC: _____

PRINT NAME: _____

MY COMMISSION EXPIRES _____

OFFICE USE ONLY			
METER #	_____	READ	_____
TECH	_____	DATE	_____
COMMENTS	_____		