



City of Callaway Utility Billing Department

6601 E Hwy 22 \* Callaway, FL 32404 \* Telephone (850) 871-6100 \* 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 can connect your water service every day except, week-ends, and holidays.

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: Phone

Cell Phone Work Phone

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 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 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 TIME COMMENTS