



Customer Service  
 50 Bridge St.  
 St. Augustine, FL 32084  
 Ph: 904-825-1037 | Fax: 904-825-1039  
 Email: [UtilityBilling@CityStAug.com](mailto:UtilityBilling@CityStAug.com)

## Application for Commercial Water Service

(Please Print)

Business Name: \_\_\_\_\_ Date: \_\_\_\_\_

Service Address: \_\_\_\_\_ Unit #: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Contact Telephone #: \_\_\_\_\_

Mailing Address: (only if different from service address)

\_\_\_\_\_  
 \_\_\_\_\_

Business Telephone #: \_\_\_\_\_ Business Fax #: \_\_\_\_\_

Business Email address: \_\_\_\_\_

Business Website (if applicable): \_\_\_\_\_

Business Square Footage: \_\_\_\_\_

Tax ID #: \_\_\_\_\_ or Social Security # (last 4 only): XXX-XX- \_\_\_\_\_

A telephone number is necessary so that we may contact you for a credit card number in order to pay for your deposit and/or activation fee.

DATE SERVICE REQUESTED TO START: \_\_\_\_\_

OWN \_\_\_\_\_ RENT \_\_\_\_\_

Deposits made before 12:00 noon Monday through Friday may receive same day service.

Activation Fee: \$30.00

Deposit: Determined at the time of application

A COPY OF LLC/CORPORATION/FICTITIOUS NAME PAPERS ARE REQUIRED FOR SERVICE.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_