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bradenton
The Friendly City

APPLICATION FOR SEWER AND/OR WATER SERVICE

*Return **application** with a copy of your **photo ID**, **proof of ownership/authorization** (HUD, Settlement Statement, or valid lease agreement), and **payment** to:*

City of Bradenton Utilities Department, 101 Old Main Street Bradenton, Florida 34205-7865

***Customer Service Phone:** 941.932.9434 **- Customer Service Fax:** 941.932.9549 **- E-mail:** help.utilities@cityofbradenton.com*

APPLICANT NAME: _____ **Photo ID #**_____ **State**_____
FIRST **LAST** **M**

TELEPHONE#: (_____) **E-MAIL** _____

SERVICE ADDRESS: _____ **SERVICE ACTIVATION DATE**___/____/____

BILL PREFERENCE (choose one): ☐ **eBILL (bill is emailed)** ☐ **PAPER Bill (bill is mailed by USPS)**

IF YOU ARE RENTING THE PROPERTY, PLEASE FILL IN THE INFORMATION BELOW:

*LANDLORD*_____ *TELEPHONE#: (_____)*_____

*ADDRESS*_____*CITY:* _____ *STATE:* _____ *ZIP CODE:* _____

BILLING ADDRESS: *(IF DIFFERENT FROM SERVICE ADDRESS)*

NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

SEWER AND/OR WATER SERVICE CONTRACT

The undersigned applicant for water and/or sewer service agree, if applicable, to conform to and abide by all the rates, rules and regulations provided by ordinance, code, resolution or otherwise of the City of Bradenton for water, wastewater and/or garbage service as are now, or hereafter, in force and which are a part of this contract. Applicant further agrees to provide notice in writing through the Utilities Department that service is to be discontinued for whatever period of time. Verbal notice is accepted however not binding.

Return this completed application with a copy of your Photo ID, a valid copy of a HUD or Settlement Statement proving ownership or valid lease agreement. Deposits and service fees are required before service is rendered. For standard residential accounts, enclose a check or money order to include a $15 service fee, plus a $135.00 water account deposit. Inquire at the Utilities Department for commercial and multi-family deposit amounts. Deposits are applied toward your account as a credit upon completion of 24 consecutive months of timely payments.

This application is subject to the Florida Public Records law. Some persons may be entitled to have their personal information exempted from Public Records production. If you have any legal basis for exempting your information (law enforcement officers, certain government supervisory officials, etc.), please state the basis below. In the event of a Public Records request for your application, legal counsel will be asked to confirm whether the claimed exemption applies. Public Records information exemption: ☐ **YES**

Please state the basis for exemption:_____

Applicant Signature*: _____ Date:_____

**By typing your name in the Applicant Signature space, you agree this is to be used as your signature and you further agree to the terms and conditions set forth in this application.*

***** FOR OFFICE USE ONLY *****

Date of Application: _____ **Previous customer #** *(if applicable)*_____ **Previous Balance** (*if applicable*) $_____

Deposit: **#Units**_____ **Amount $**_____ **Billed** ☐ **Collected** ☐ Payment Type: ☐ **Credit Card** ☐ **Check #**_____ ☐ **Cash**

Auto Debit? ☐ **Yes** ☐ **No** Forms Reviewed: ☐ **Photo ID** ☐ **Proof of Ownership/Lease Agreement/MPAO Website**

Accepted/Processed by: _____
Customer Representative