

Seminole County Water & Sewer Business Application for Utility Service

Corporation Name: _____DBA: ____

Business Structure	e:Sole Prop	prietorLLPLLC S COR rshipOther:	P
Occupational Licer	nse #: 	Fed. I.D. #: Deposit Amount:	
Local Contact:	=9111.	Phone Number:	
		Inone Number.	
Corporate Address Street:			
State:	Zip:	Phone:	
Service Address			
City:			
State:	Zip:	Phone:	
Bill To Address			
City:			
State:	Zip:	Phone:	
***Important Info			
to have water rec	onnected until mmercial accoun	that has been disconnected winth the following business day. Into are required to pay a depose for the deposit amount to sufficient to the deposit amount to sufficient the sufficient to the deposit amount to sufficient the deposit amount the depos	sit.
Submit Application Seminole County Wa PO Box 958443 Lake Phone: (407) 665-213 E-Mail: wsapplication	ater & Sewer: e Mary, FL 327! 10 Fax:(407)60	95-8443. 65-2125	
There will be a \$30 administrative cost		rge on your first bill to cover maening your account.	intenance and
at the above add service and to p • I am also respon the service is e water faucets or	dress. I agree to be any charges in end as in	ce from Seminole County Water and to follow and abide by all rules ffect as stated on each monthly big sure that all faucets are turned e county is not liable for damages n. f my account will result in discor	Tor utility all. I off before s caused by
Signature:		Date:	_