

PLEASE PRINT

CITY OF CHIPLEY

APPLICATION FOR CITY UTILITIES COMMERCIAL & INDUSTRIAL

WATER ( ) SEWER ( ) GARBAGE ( ) GAS – YES ( ) NO ( ) \_\_\_\_\_
(Sign if refusing gas service.)

Name of Business \_\_\_\_\_ Type of Business \_\_\_\_\_

OWNERSHIP INFORMATION:

1. Owner Name \_\_\_\_\_ SSN# \_\_\_\_ - \_\_\_\_ - \_\_\_\_
Last Name First Name Middle Initial

2. Drivers License # \_\_\_\_\_ Occupational License # \_\_\_\_\_
Applied For \_\_\_\_ Renewal \_\_\_\_ Transferred \_\_\_\_

3. Service Address \_\_\_\_\_ Business Telephone # \_\_\_\_\_

4. Mailing Address \_\_\_\_\_ Home Phone # \_\_\_\_\_

5. Local Contact Person \_\_\_\_\_ Phone # \_\_\_\_\_

6. State License # \_\_\_\_\_ E-Mail Address \_\_\_\_\_

COMPLETE THE FOLLOWING:

- 1. Backflow Preventer \_\_\_\_ Yes \_\_\_\_ No (Provide copy of last Backflow Test – Inspected Annually)
2. Grease Trap \_\_\_\_ Yes \_\_\_\_ No (Unit must be inspected & pumped quarterly.)
3. Principal Product/Service \_\_\_\_\_

INFORMATION FOR GOVERNMENT MONITORING PURPOSES

The following information is requested by the Federal Government for certain types of funding. You are not required to furnish this information, but are encouraged to do so. If you do not wish to furnish the following information, please check the box below.

Black Hispanic American Indian or Alaskan Native White Other I do not wish to furnish this information

THE NET AMOUNT OF THIS BILL IS DUE AND PAYABLE ON OR BEFORE THE CLOSE OF BUSINESS ON THE 15TH. AFTER THIS DATE A 10% PENALTY WILL BE ADDED. IF BILL IS NOT PAID BY THE 20TH OF THE MONTH, SERVICE MAY BE DISCONNECTED ON THE 21ST.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

OFFICIAL USE ONLY

The following inspections will be required before water service can be turned on.

- 1. Backflow Preventer in place & up to date \_\_\_\_\_ Approved \_\_\_\_\_ Not Approved
2. Grease Trap in place & inspected \_\_\_\_\_ Approved \_\_\_\_\_ Not Approved

Inspector's signature \_\_\_\_\_ Date \_\_\_\_\_

TO DISCONTINUE SERVICE

The individual whose name is on the account MUST come into City Hall and sign a request to discontinue service before any refund of deposits can be made and service discontinued.

RECEIPT OF PAYMENT POLICY \_\_\_\_\_
Signature