

Submit Form to:
City Hall
245 S. Mulberry Street
Monticello, FL 32344
PHONE: 850-342-0291
FAX: 850-997-2217
E-MAIL: info@mymonticello.net

Please also submit a copy of driver's license

CITY OF MONTICELLO APPLICATION FOR UTILITY SERVICE

DATE SERVICE TO BEGIN: _____

****INFORMATION ABOUT
SERVICE ADDRESS****

NAME: _____

____ Single-Family - Swimming
Pool? ____ Yes ____ No

SERVICE ADDRESS: _____

Irrigation Meter ____ Yes ____ No
____ Business/Industrial- How Many
Employees? _____

MAILING ADDRESS: _____

TELEPHONE #: Work _____
Home _____ Cell _____

E-MAIL ADDRESS: _____

HAVE YOU USED CITY WATER/SEWER/GARBAGE SERVICES IN THE PAST? YES ____ NO ____

IF YES, UNDER WHAT NAME AND ADDRESS? _____
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The following information is requested by the Federal Government to monitor the city's compliance with equal opportunity laws. You are not required to furnish this information, but are encouraged to do so. If you furnish the information, please provide both ethnicity and race. For race, you may check more than one designation.

Ethnicity: ____ Hispanic or Latino ____ Not Hispanic or Latino

Race: ____ American Indian or Alaska Native ____ Asian
____ Black or African American

____ Native Hawaiian/Other Pacific Islander ____ White

Sex: ____ Female ____ Male
=====

Please read and acknowledge:

Monthly utility bills are mailed the last week of every month and are due by the 10th of the following month. A ten percent late charge is assessed after the 10th of each month. Accounts which carry a two-month balance are subject to disconnection on the 20th of the month and a disconnection fee of \$20.00 will automatically be charged. Service will not be restored until all charges due are paid in full. We are not responsible for undelivered mail.

I HAVE READ THE FOREGOING.

Applicant Signature

Contact City Hall with Arrangements for Payment of Deposit to be made by: Cash
____ Check ____ Credit Card ____

