



New Residential Account Applicant Information

Account Number: _____ Cycle Number: _____

Full Name: _____ Date: _____
Last First M.I.

Other Responsible Party: _____
Last First M.I.

Service Location: _____ Own: _____ Rent: _____

Mailing Address (if different from above)

Home Phone: _____ Cell Phone: _____

Email: _____

How would you like to receive your bill? eBill Mail Both Would you like Automatic Bank Draft? ATTACH VOIDED CK PLEASE YES NO

Does address have existing TRASH CAN? YES NO

Have you had prior service in Macclenny? YES NO If yes, where? _____

Disclaimer and Signature

By signing below, I authorize The City of MacClenny to turn the water on at the location above and assume liability.

Signature: _____ Date: _____

Signature: _____ Date: _____

**** DEPOSIT FOR RESIDENTIAL ACCT WILL BE \$125 (MACC II \$100). CASH, CHECK, OR MONEY ORDER ACCEPTED. THE ACCOUNT WILL NOT BE ESTABLISHED WITHOUT THE DEPOSIT PAID!**

FOR OFFICE USE ONLY

Applicant 1

Applicant 2

DL Number: _____

DL Number: _____

DL State: _____ DOB: _____

DL State: _____ DOB: _____

Deposit Amount: _____ Administration Fee: _____ Cash/Card/Check: _____

Utility Clerk: _____ Date: _____