THIS SPACE IS FOR OFFICE USE ONLY							
CYCLE/ROUTE	CUSTOMER ID-ACCOUNT						



10770 West Oakland Park Blvd, Sunrise, FL 33351
Phone: 954.746.3232 Fax: 954.572.2479 Email: customerservice@sunrisefl.gov

APPLICATION FOR UTILITY SERVICE (COMMERCIAL CUSTOMERS)

Business Name								
DBA (if applicable)								
Service Address							Unit #	
Mailing Address							Unit #	
Owner Name(s)								
Business Telephone	()	1			Mobile Telephone	()		
Email Address(es)								
Bill Delivery Preference	e	1	Email		Print (Please Ch	neck ONE)		
Tax I.D. Number					-			
Do You:	Own		Rent		Purchase or	Lease Date: _		
Please be advised that pursuant to Section 119.071(5)(a)2.a., Florida Statutes, the City of Sunrise ("City") discloses that the City requests your social security number for the purpose of classification of accounts, identification and verification, credit worthiness, billing and payments, data collection, reconciliation, tracking, and benefit processing. Social security numbers are also used as a unique numeric identifier and may be used for search purposes. I understand and agree that as a condition to receiving utility service, I will be subject to the provisions of Chapter 15 of the City Code, as amended from time to time by the City. I further understand that unpaid utility account balances constitute a lien on the real property. The property owner is responsible for unpaid balances on prior owner accounts.								
							_	(Please initial)
SO THAT WE MAY PROCESS THIS APPLICATION, PLEASE PRESENT THE FOLLOWING: 1. Executed settlement statement, executed ALTA statement, recorded warranty deed, property tax bill, or lease. 2. Driver license or official photo identification. 3. Republic Services application for service, if applicable. Contact Republic at (954) 327-9504. 4. Required deposit for services- See attached.								
2. Village	City Hall Civic Cer	TY ACCOUN I, 10770 West nter, 6800 Sur Center, 60 W	Oakland F set Strip	Park Boulev				
FINAL CHARGES A service fee of \$15.0 of account closing.	0 per wa	ter/irrigation m	neter for wa	ater accoun	ts and \$10.00 per mete	er for natural gas	s accounts is	s assessed at the time
Signature (Agent o	r Owne	er)						
Title						Date		

We are pleased to have you as a customer, and hope that you will contact us if we may be of any service to you in the future. Please call our customer service staff at (954) 746-3232 or visit our website at www.sunrisefl.gov should you have any questions about your utility account or service.