

# POLK CITY UTILITIES

## COMMERCIAL APPLICATION

Account # _____
Location Id _____
Prev Acct # _____

123 BROADWAY BLVD., SE  
POLK CITY, FL 33868

PHONE 863-874-4808  
FAX 863-984-1984

Circle appropriate:       New Business       New Construction       Realtor

Name of Business: \_\_\_\_\_ Contact Person: \_\_\_\_\_

Service Address: \_\_\_\_\_ Start Service on: \_\_\_\_\_

Billing Address: \_\_\_\_\_

Previous Address: \_\_\_\_\_

Email address: \_\_\_\_\_

Business phone (    ) \_\_\_\_\_ - \_\_\_\_\_ Fax (    ) \_\_\_\_\_ - \_\_\_\_\_ Other (    ) \_\_\_\_\_ - \_\_\_\_\_

EIN# or SS# \_\_\_\_\_ Authorized person to make account changes: \_\_\_\_\_

Have you ever had an account with the Polk City Utilities before? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please list previous account address \_\_\_\_\_

Services Needed: \_\_\_\_\_ Water    \_\_\_\_\_ Sewer    \_\_\_\_\_ Garbage (Regular Can p/u \_\_\_\_\_ or Dumpster \_\_\_\_\_)

Do you have an irrigation system? Yes \_\_\_\_\_ No \_\_\_\_\_

Where does the irrigation water come from? Public system \_\_\_\_\_ Well \_\_\_\_\_ Lake \_\_\_\_\_

Do you want an irrigation meter? Yes \_\_\_\_\_ No \_\_\_\_\_

Alternate Emergency Contact and phone number: \_\_\_\_\_

All monthly utility bills must be paid in full the 25<sup>th</sup> of the month to avoid a late fee of \$10.50. All delinquent accounts will receive a \$50 Nonpayment fee if not paid on the 5<sup>th</sup> of the following month prior to service interruption. If services are interrupted, a \$55 reconnect fee must be paid in addition to the delinquent bill and the \$50 nonpayment fee in order to reinstate service. Tampering with the meter in any way may result in a fine, criminal charges, and penalties.

Please contact our office for any questions regarding your bill. Water Department Office hours are Monday - Friday 8:00am - 5:00pm. Any service requests received after 2:00pm may be processed the next business day.

Authorized Agent: \_\_\_\_\_ Date \_\_\_\_\_ Initial here \_\_\_\_\_

**DO NOT WRITE BELOW THIS LINE - FOR OFFICE USE ONLY**

Property	Inside City	Outside City	Light Score	Cash	Check #	MO #	Receipt #	Adverse Letter Given
Commercial Deposit	300.00	300.00	Green	Y or N				Y or N
Other			Yellow	Y or N				Y or N
			Red	Y or N				Y or N

Signature of \_\_\_\_\_ Date \_\_\_\_\_  
UB Clerk \_\_\_\_\_  
Update 1/5/2022