## City of Lake Helen

PO Box 39 • 327 South Lakeview Drive Lake Helen, Florida 32744 386•228•2121 fax 386•228•9714

## **CUSTOMER WATER SERVICE REQUEST**

## **NEW CUSTOMER SERVICE** Request Date: \_\_\_\_\_ Start Service Date: \_\_\_\_\_ Account Name: Copy Received: [ ] Drivers License #:\_\_\_\_\_ Phone #: \_\_\_\_\_ Fax: \_\_\_\_ Email: \_\_\_\_ Service Address: [] Owner [] Renter Paid: [] Cash [] Check Check one: Billing Mail Address: Water Meter Reading: \_\_\_\_ [ ]New Card Completed [ ]Entered in Database PER CITY OF LAKE HELEN CODE OF ORDINANCES, ARTICLE 5, SECTION 5.03.06,C,G: The owner of said property is responsible for the water billing from the time of the disconnect date until either the new owners or new renters remit the necessary water deposit to the City. CUSTOMER DISCONNECT SERVICE Request Date: \_\_\_\_\_ Disconnect Date: \_\_\_\_\_ Account Name: Account #: Sequence #: \_\_\_\_\_ Phone #: \_\_\_\_\_ Fax: \_\_\_\_ Email: \_\_\_\_\_ Service Address: []Owner []Renter Check one: Forwarding Address: Water Meter Reading: \_\_\_\_\_ [ ]Card Final Reading [ ]Entered in Database If Account is the Homeowner: Is the property being sold? [] Yes [] No If Yes; Closing date: New Owners: If Account is a Renter; Landlord/Owner's Name: [ ] Phone Request Signature:

Lake Helen Form 204 Revision A