

**CITY OF WAUCHULA
APPLICATION & AGREEMENT FOR SERVICES**

DATE _____ SERVICE START DATE _____

NAME _____ &/OR _____

LOCATION _____

MAILING ADDRESS _____

HOME PHONE # _____ CELL PHONE # _____

BUSINESS REQUEST

BUSINESS NAME _____ FEDERAL ID# _____

PRINCIPAL OFFICER(S) _____

HOME PHONE # _____ CELL PHONE # _____

DRIVER'S LICENSE # _____

SEX _____ DRIVERS LICENSE # _____ CO-DRIVERS LICENSE # _____

CURRENT EMPLOYER _____ CO-APPLICANT'S EMPLOYER _____

EMAIL ADDRESS _____

OFFICE USE ONLY

ACCT # _____ CSR _____ DATE _____

REPORT # _____ COMMENTS/REMARKS _____

I agree to pay \$ _____ for my deposit. I agree to pay/transfer \$ _____ today and will pay/transfer \$ _____ by _____.
I understand, if I do not pay the additional deposit, utilities will be disconnected at the current address without further notice.
I hereby make application to the City of Wauchula for utilities for the above named person(s) and agree to pay for utility services furnished to this account in this name by the City of Wauchula in accordance with the City's current rate schedule and any amendments thereto.

I agree, in order for the City of Wauchula to service my account or to collect any amounts I may owe, they may contact me by telephone at any telephone number associated with my account, including wireless telephone numbers, which could result in charges to me. The City and/or any agency hired by the City may also contact me by sending text messages or emails, using any email address I provide them. Methods of contact may include using pre-recorded or artificial voice messages and/or the use of an automatic dialing device, as applicable.

I have read this disclosure and agree that The City of Wauchula may contact me as described above.

WITNESS

CUSTOMER SIGNATURE

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I, _____, UNDERSTAND AND AGREE TO PAY ALL SERVICES THAT ARE AVAILABLE AT THIS ADDRESS AS FOLLOWED:

ELECTRIC WATER SEWER GARBAGE GARBAGE ASSESSMENT

SECURITY LIGHT(S) ___kwh SPRINKLER METER ALL RELATED TAXES

This is to certify that all electrical services provided to the following account numbers are exempt from Florida Sales Tax for the following reason:

_____The electric service to this account will be used exclusively to serve a residential household. No commercial activities, including short term rental activity will be served by this meter. Short term rental activity is defined as periods of less than six months.

_____The electrical services to this account will be used exclusively to serve common areas of residential housing complexes. No commercial activities will be served by this meter.

_____The electric service to this account will be used exclusively to serve a business entity that has been exempted from sales tax by the Florida Department of Revenue, certificate number, which expires on ___/___/___.

_____ **By initialing this I agree to all the terms and Ordinances by the City of Wauchula and that I have received the Utility Service Guide.**

The undersigned understands that if such purchases of electric power or energy do not qualify for exemption, the undersigned will be subject to sales and use tax, interest, penalties by the Florida State Department of Revenue, and that when any person shall fraudulently, for the purpose of evading tax, issue to a vendor or to any agent of the State a Certificate or statement in writing which he claims exemption from the sales tax, such person, in penalty of 100 percent of the tax, shall be liable for fine and punishment as provided by law for a conviction of a misdemeanor of the second degree, as provided in FL 775.002, FL 775.003. FL 775.004.

Signature: _____

Signature: _____

Name of
Organization: _____

Date: _____

Witness
Signature: _____