



Town of Highland Beach
3614 S. Ocean Blvd.
Highland Beach, Florida 33487
Phone: (561) 278-4548
Fax: (561) 276-9829

RESIDENTIAL APPLICATION FOR UTILITY SERVICE

The following information is being requested for the purpose of opening an account to provide and bill for utility service. Proof of ownership (deed) or authorized occupancy (lease) is needed along with a copy of your photo ID attached with this form to establish utility service.

General Information

Owner Tenant Purchase/Lease Date: _____

If a lease, term length _____

Service Street Address: _____

Applicant's Full Name: _____

Mailing Address: _____

City _____ State _____ Zip _____

Telephone Number: _____ e-Mail Address: _____

Property Owner Information

If renting, please give the following Information:

Owner/Landlord Name: _____

Telephone Number: _____

I UNDERSTAND THAT I AM FULLY RESPONSIBLE FOR ALL CHARGES AT THE ABOVE NOTED PROPERTY. I AGREE TO PAY FOR SERVICES PROMPTLY AT THE RATES ESTABLISHED BY THE TOWN OF HIGHLAND BEACH, AND I AGREE TO ABIDE BY PRESENT AND FUTURE REGULATIONS RELATING TO WATER, WASTEWATER, AND OR RECLAIMED WATER SERVICES AS ESTABLISHED BY THE TOWN OF HIGHLAND.

SIGNATURE OF APPLICANT: _____

DATE: _____

PLEASE RETURN COMPLETED APPLICATION TO THE FINANCE DEPARTMENT AT THE ADDRESS OR FAX NUMBER ABOVE.

OFFICE USE ONLY:

Location ID: _____