



BOARD OF COUNTY COMMISSIONERS
WATER AND WASTEWATER SERVICES (WWS)
CUSTOMER PAYMENT CENTER
2555 WEST COPANS ROAD, BLDG. 1
POMPANO BEACH, FL 33069
(954) 831-3250 • water@broward.org

APPLICATION FOR NEW SERVICE

(1) APPLICANT INFORMATION

CUSTOMER TYPE:	Residential	Commercial	Government
Owner	Purchase Date: _____	Tenant	Lease Effective: _____ Lease Ends: _____
LAST NAME: _____ FIRST NAME: _____			
COMPANY NAME (if applicable): _____			
CO-OWNER(S), CO-TENANT(S), OR REPRESENTATIVE'S (REP) NAME (if applicable): _____			
PHOTO ID: APPLICANT:	_____	(_____) _____	_____
	TYPE	STATE	NUMBER
CO-APPLICANT OR REP:	_____	(_____) _____	_____
	TYPE	STATE	NUMBER
SERVICE ADDRESS:	_____	_____	_____
	STREET	CITY	STATE ZIP + 4
MAILING ADDRESS:	_____	_____	_____
SAME AS ABOVE	STREET	CITY	STATE ZIP + 4
PHONE: HOME:	_____	WORK: _____	MOBILE: _____
ENROLL IN E- STATEMENTS	YES	NO	E-MAIL ADDRESS: _____

(2) PROPERTY OWNER INFORMATION – ONLY NEEDED IF APPLICANT IS A TENANT

PROPERTY OWNER:	_____
MAILING ADDRESS:	_____
	STREET CITY STATE ZIP + 4
PHONE: HOME:	_____
WORK:	_____
MOBILE:	_____
E-MAIL ADDRESS:	_____

APPLICANT AGREEMENT: I AGREE TO BE FULLY RESPONSIBLE FOR ALL UTILITY CHARGES ASSESSED TO ME AT THE ABOVE NOTED PROPERTY. I AGREE TO PROMPTLY PAY FOR UTILITY SERVICES BILLED MONTHLY ACCORDING TO THE SCHEDULE OF UTILITY RATES IMPLEMENTED BY BROWARD COUNTY WATER AND WASTEWATER SERVICES. ACCOUNTS ARE BILLED MONTHLY, PLEASE CONTACT CUSTOMER SERVICE IF YOU DO NOT RECEIVE YOUR BILL TO AVOID INTERRUPTION OF SERVICE OR LATE CHARGES DUE TO NON-PAYMENT. I AGREE TO COMPLY WITH ALL CURRENT AND FUTURE FEDERAL AND STATE LAW, BROWARD COUNTY ORDINANCES AND REGULATIONS, AND BROWARD COUNTY WATER AND/ OR WASTEWATER SERVICES PROCEDURES AND GUIDELINES.

APPLICANT UNDERSTANDS THAT PROPERTY TYPE FOR THIS ACCOUNT MAY IMPACT ESTIMATED MAXIMUM UTILITY DEMAND AND PREMISE'S CAPITAL RECOVERY RATE. THE ACCOUNT SECURITY DEPOSIT COLLECTED TO OPEN A NEW ACCOUNT WILL BE REFUNDED ONLY TO THE APPLICANT NAMED ABOVE AND ONLY AFTER THE ACCOUNT IS CLOSED AND ALL ACCOUNT CHARGES HAVE BEEN SATISFIED.

X _____ **DATE** _____

FOR INTERNAL USE ONLY:

_____	_____	_____	_____	\$ _____	_____
CUSTOMER NO.	PREMISE NO.	ROUND	WORK DAY	SECURITY DEPOSIT	CS REP