



**Start Utility Service – New Construction**  
 Utilities Commission, City of New Smyrna Beach, Florida  
 Phone (386) 427-1361 | Fax (386) 424-2713 | www.ucnsb.org

<b>To be completed by UCNSB:</b>
Customer ID _____
Location ID _____
Start Date _____

Date \_\_\_\_\_ Requested Service Start Date \_\_\_\_\_

**Contact Information - Individual**

Name (First, M.I., Last) \_\_\_\_\_  
 Date of Birth \_\_\_\_\_ Social Security # \_\_\_\_\_  
 Current Address (no P.O. Box) \_\_\_\_\_ Email \_\_\_\_\_  
 Phone (home) \_\_\_\_\_ (cell) \_\_\_\_\_ (work) \_\_\_\_\_

**Contact Information - Company** (Fax Corporate Papers to 386-424-2713)

Company Name \_\_\_\_\_ Tax ID \_\_\_\_\_  
 Company Address \_\_\_\_\_ Email \_\_\_\_\_  
 Primary Contact \_\_\_\_\_

**Mailing Information (if different from above)**

Name (First, M.I., Last) \_\_\_\_\_  
 Mailing Address \_\_\_\_\_

**Requested Service Information**

Service Address \_\_\_\_\_ Service Address is: \_\_ Business \_\_ Residence

\_\_\_ Temporary Electric *Circle One:* Overhead Underground (where available)

\_\_\_ Permanent Electric *Circle One:* Overhead Underground (where available)

Electric Service Size (in AMPs): *Circle One:* 200 300 400 600 800

Potable Water \_\_\_ Meter Size *Circle One:* 5/8" 1" 1 1/2" 2"

Sanitary Sewer \_\_\_

Reuse Water \_\_\_ Meter Size *Circle One:* 3/4" 1" 1 1/2" 2"

Irrigation Meter \_\_\_ Meter Size *Circle One:* 5/8" 1" 1 1/2" 2"

Supplemental (\$300) \_\_\_ Regular (\$400) \_\_\_

2" Temp Fire Hydrant Meter \_\_\_ 2" Temp Construction Meter \_\_\_

I hereby make application to the Utilities Commission, City of New Smyrna Beach (UCNSB), Florida for utility service and upon approval of this application, agree to abide by all UCNSB resolutions, tariffs, policies, procedures, rules and standards, and acknowledge and agree this contract is made subject to the provisions of UCNSB's Rates, Charges and Fees and Services Policies and Customer Information Manual, the latter of which I have been provided, and incorporates such manual as part of this contract as it exists at the time of this contract and may be amended as per the last paragraph of said manual. I also acknowledge and agree that the undersigned, as a UCNSB customer, shall be liable for all applicable sales tax and agree that I will be personally responsible for the payment of deposit and/or utility bills rendered under this account.

Applicant Signature \_\_\_\_\_ Deposit (if required) \$ \_\_\_\_\_ Deposit due date \_\_\_\_\_