

**CITY OF MONTICELLO  
APPLICATION FOR UTILITY SERVICE**

DATE SERVICE TO BEGIN: \_\_\_\_\_

NAME: \_\_\_\_\_

SERVICE ADDRESS: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

\_\_\_\_\_

TELEPHONE #: Work \_\_\_\_\_ Home \_\_\_\_\_ Cell \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

HAVE YOU USED CITY WATER/SEWER/GARBAGE SERVICES IN THE PAST? YES \_\_\_\_\_ NO \_\_\_\_\_  
IF YES, UNDER WHAT NAME AND ADDRESS? \_\_\_\_\_

**\*\*INFORMATION ABOUT SERVICE ADDRESS\*\***

\_\_\_\_\_ Single-Family - Swimming Pool? \_\_\_\_\_ Yes \_\_\_\_\_ No // Irrigation Meter \_\_\_\_\_ Yes \_\_\_\_\_ No  
\_\_\_\_\_ Apartment  
\_\_\_\_\_ Business/Industrial - How Many Employees? \_\_\_\_\_

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**The following information is requested by the Federal Government to monitor the city's compliance with equal opportunity laws. You are not required to furnish this information, but are encouraged to do so. If you furnish the information, please provide both ethnicity and race. For race, you may check more than one designation.**

**Ethnicity:** \_\_\_\_\_ **Hispanic or Latino** \_\_\_\_\_ **Not Hispanic or Latino**  
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**Race:** \_\_\_\_\_ **American Indian or Alaska Native** \_\_\_\_\_ **Asian** \_\_\_\_\_ **Black or African American**  
\_\_\_\_\_ **Native Hawaiian/Other Pacific Islander** \_\_\_\_\_ **White**  
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**Sex:** \_\_\_\_\_ **Female** \_\_\_\_\_ **Male**

***Please read and acknowledge:***

Monthly utility bills are mailed the last week of every month and are due by the 10<sup>th</sup> of the following month. A ten percent late charge is assessed after the 10<sup>th</sup> of each month. Accounts which carry a two-month balance are subject to disconnection on the 20<sup>th</sup> of the month and a disconnect fee of \$20.00 will automatically be charged. Service will not be restored until all charges due are paid in full. We are not responsible for undelivered mail.

I HAVE READ THE FOREGOING.

\_\_\_\_\_  
Applicant Signature

Contact City Hall with Arrangements for Payment of Deposit to be made by:

\_\_\_\_\_ Cash  
\_\_\_\_\_ Check  
\_\_\_\_\_ Credit Card

Submit Form to:

City Hall  
245 S. Mulberry Street  
Monticello, FL 32344  
PHONE: 850/342-0291  
FAX: 850/997-2217  
E-MAIL: Jeri@mymonticello.net