ADMINISTRATIVE FEE	WT	SW	RF	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	IR	EF
CIT	Y OF TARPON S	SPRINGS -	UTILITY SECURIT	Y DEPO	SITS	
CUSTOMER NAME AND ADDRESS			AMOUNT OF DEPOS	T	DATE	
					SERVICE START DATE	
			DRIVER'S LICENSE	NO.	DATE O	FBIRTH
MAILING ADDRESS OF CUSTOMER (IF DIFF	ERENT FROM SERVICE LOCAT	ION)	HOME PHONE		FEI/	SSN
٠,				ACCOUNT	NUMBER	
PREVIOUS ADDRESS			EMAIL ADDRESS FOR E-BILL NO	OTIFICATION		
NAME OF PERSON (NOT LIVING WITH YOU)	OR CORPORATE OFFICE - FC	OR EMERGENCY NOTIF	FICATION P	HONE NO		
EMPLOYER NAME	4		P	HONE NO		
LAND LORD NAME			Pi	HONE NO		
attorney's fees. Customer Type						
AUTHORIZED SIGNATUR	E	COMPA	ANY NAME		CUSTOMER SIGNATI	JRE
3. Send Proof of Own	- \ V	•	ement, Purchase Ag			se Agreeme
4. Indicate the date to	start service.					
5. Return the security	card with a chec	k for the dep	osit amount with			
an additional \$35.0	0 administrative :	fee to:				
		Jtility Billing	z Division			
	P.O. Box 500	•	,			
		ings, FL 3468	88-5004			
	• •	· ·				
	Fax: (727)-94	13-405/ EIII	ail: ubcts@ctsfl.us			
6. Total amount due _			<del>arteria de la constanta de</del>			
(1	Make checks payable to:	: City of Tarpon S <sub>I</sub>	prings)			
If sending by <u>Federa</u>	l Express, Priority	Mail or United	d Parcel Service mail	to:		
	City of Tarpo	on Springs				
	Attention: U	tility Billing [	Division			
	412 N. Ring A	Ave				

Tarpon Springs, FL 34689-4012