

St. Johns County Board of County Commissioners

UTILITY DEPARTMENT
Customer Service

PO Drawer 3006
Saint Augustine, Florida
32085-3006



Phone: (904) 209-2700
Fax: (904) 209-2718
Email: utilbill@sjcfl.us

APPLICATION FOR WATER/SEWER SERVICE

**Office Hours: 7:30 A.M. – 4:30 P.M.
Monday through Friday**

Please complete the following information for water/sewer service. If you have any questions, our staff will be happy to assist you.

Please note that a \$30.00 New Service Charge will be applied to your first bill.

Name: _____ **Date:** _____

Service Address: _____ **Apt. #:** _____ **Zip Code:** _____

Mailing Address (only if different from service address):

Street: _____ **Apt. #:** _____

City: _____ **State:** _____ **Zip:** _____

Driver License Number (REQUIRED): _____

Last Four Digits of Social Security # (REQUIRED): _____

Primary Phone Number: _____ **Secondary Phone Number:** _____

Email Address: _____

Date Service Required to Start: _____

Deposit made before 12:00 noon, Monday through Friday, receives same day service. If deposit is received after 12:00 P.M., service will commence on the following business day.

A New Service Charge of \$30.00 will be applied to the first bill.

Signature: _____ **Date:** _____

For Internal Use Only:

Customer Number: _____ Location Number: _____