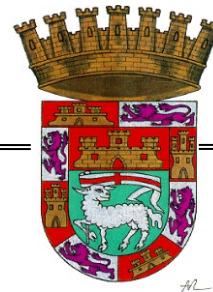


St. Johns County Board of County Commissioners

*UTILITY DEPARTMENT
Customer Service*

*PO Drawer 3006
Saint Augustine, Florida
32085-3006*



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

TEMPORARY SERVICE

Please turn **Temporary Service** on at:

Service Address: _____

Date to Start: _____ **Date to End:** _____

(Service will automatically be disconnected within 7 calendar days from start date.)

Name: _____ **Phone Number:** _____

Email Address: _____

Last 4 Digits of Social Security # (REQUIRED): _____

Driver License Number (REQUIRED): _____

Billing Address (Billing Address MUST be different than the service address for Temporary Service):

Street: _____ **Apt. Number:** _____

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

Please draft my credit card number provided below for the **\$90.00** Temporary Service Charge.

Card Number: _____ **Exp. Date:** ____/____ **CVV:** _____

Signature: _____ **Date:** _____