



# Auburndale Utility Application

Print then email application to:

[UBO@auburndalefl.com](mailto:UBO@auburndalefl.com)

**\*Must Include a copy of your Driver's License\***

Sign up for Eye on Water: <https://eyeonwater.com>



PO Box 186  
Auburndale FL 33823

Ph: 863-965-5500  
Fax: 863-965-5505

Primary Account Holder: \_\_\_\_\_ EIN/DL# \_\_\_\_\_

Primary Date of Birth: \_\_\_\_\_

Secondary Account Holder: \_\_\_\_\_ EIN/DL# \_\_\_\_\_

Secondary Date of Birth: \_\_\_\_\_

Request Utility Service at Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Email Bills: Yes \_\_\_\_\_ No \_\_\_\_\_

Mail Bill: Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, mailing address: \_\_\_\_\_

Have you ever had an account with the City of Auburndale? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please provide address and name on prior account \_\_\_\_\_

Will this be a residence \_\_\_\_\_ or a business \_\_\_\_\_ Are you the owner \_\_\_\_\_ or a renter \_\_\_\_\_

For a business service request located inside the City limits, a Business Tax Receipt must be obtained. Please be aware the property must be inspected and approved by a Building Official and Fire Inspector prior to issuance. Applications for a Business Tax Receipt may be obtained online or at the Construction Services Office.

All utility bills must be paid by the due date or service will be disconnected and will not be reinstated until the full balance on the account is paid. If service is disconnected, you are subject to a reinstatement fee. If you have any questions regarding your utility bill, please call the Public Utilities Office. Their office hours are Monday through Friday, 8:00 a.m. to 4:00 p.m. For after-hours emergency services, please call the Sheriff's Dispatch at (863) 401-2240. Any request for after-hours services may result in a \$50 fee.

For the safety of our utility staff, on-site pets must be secured in areas away from water meter and garbage can locations. To prevent water damage, verify all water faucets are turned off prior to the scheduled connection date. If water is found to be running when we attempt service connection, service will not be connected until someone is present at the service address. Please be aware, the City is not responsible for damage resulting from open, leaking, or missing fixtures.

**I hereby request utility service(s) from the City of Auburndale at the above service address and agree to pay all appropriate deposits, fees, and charges as assessed.**

**By signing below, I confirm that I have read and agree to the above disclaimer.**

Primary Signature \_\_\_\_\_

Date \_\_\_\_\_

Secondary Signature \_\_\_\_\_

Date \_\_\_\_\_

OFFICE USE

DATE RECEIVED: \_\_\_\_\_

DEPOSIT AMT: \$ \_\_\_\_\_ START DATE: \_\_\_\_\_ ACCT #: \_\_\_\_\_ PAYID #: \_\_\_\_\_

REC'D BY \_\_\_\_\_ ENTERED BY \_\_\_\_\_ LOCATION #: \_\_\_\_\_ ANNEXATION \_\_\_\_\_