

**SOUTH MARTIN REGIONAL UTILITY
APPLICATION FOR WATER AND/OR SEWER SERVICE
BUSINESS/ASSOCIATION/ORGANIZATION**



9000 S.E. Athena Street, Hobe Sound, FL 33455
NOTE: THERE IS NO MAIL DELIVERY TO OUR PHYSICAL LOCATION
 PO Box 395, Hobe Sound, FL 33475
 Customer Service Phone: (772) 546-2511
 Executive Office Phone: (772) 546-6259
 Fax Number: (772) 546-7619
 Website: www.southmartinregionalutility.com

Date of application:
Date service to begin (closing date):

Account #

[Internal Use Only]

“NON-RESIDENTIAL”

Services not otherwise specifically defined as Single family or Multi-family. Such service includes, but is not limited to, commercial, industrial, guard house, boat slip, pool, recreation center, utility room and water cooled air conditioning.

“MULTI-FAMILY”

All multiple residential dwellings located in one building served by one meter.

PLEASE READ AND VERIFY THE INFORMATION BELOW.

The following information and your signature are needed to establish an account with South Martin Regional Utility.

PLEASE PRINT OR TYPE:

Name of Property Owner:	Corporation/Association Officer:
	Contact #:
Service Address:	
Mailing Address:	
Drivers License Number/State:	
Email Address:	

EMERGENCY CONTACT (NOT AT SERVICE ADDRESS):

Name:	Relationship:
Address:	Phone:

The undersigned acknowledges that service is provided subject to strict adherence to South Martin Regional Utility’s Uniform Service Policy and may be interrupted pursuant to any violation thereof. Undersigned also agrees to receive and pay for water and/or sewer disposal service in accordance with the rates, rules and regulations of the Utility until this service is formally discontinued. South Martin Regional Utility does not require a deposit, however a setup fee of \$30.00 will appear on your first statement for initiation of service.

BY APPLICATION, CUSTOMER RECOGNIZES THAT SOUTH MARTIN REGIONAL UTILITY IS NOT RESPONSIBLE FOR LOSS OR DAMAGE AS A RESULT OF INITIATING OR REINITIATING SERVICE. IF YOU DO NOT INTEND TO BE PRESENT AT THE TIME WATER SERVICE IS CONNECTED, BE SURE TO HAVE ALL INSIDE AND OUTSIDE FAUCETS IN THE OFF POSITION.

Signature:	Printed Name:	Date:
Customer Service Rep:		Date: