



New Smyrna Beach
... UTILITIES ...

Start Utility Service – New Construction

New Smyrna Beach Utilities
Phone (386) 427-1361 | Fax (386) 424-2713
www.nsbufl.com

To be completed by NSBUFL:
Customer ID _____
Location ID _____
Start Date _____

Date _____ Requested Service Start Date _____

Contact Information - Individual

Name (First, M.I., Last) _____

Date of Birth _____ Social Security # _____

Current Address (no P.O. Box) _____ Email _____

Phone (home) _____ (cell) _____ (work) _____

Contact Information - Company (Fax Corporate Papers to 386-424-2713)

Company Name _____ Tax ID _____

Company Address _____ Email _____

Primary Contact _____

Mailing Information (if different from above)

Name (First, M.I., Last) _____

Mailing Address _____

Requested Service Information

Service Address _____ Service Address is: Business Residence

Temporary Electric *Circle One:* Overhead Underground (where available)

Permanent Electric *Circle One:* Overhead Underground (where available)

Tug Service (Temporary Power Provided via Permanent Base)

EV Charging Station

Electric Service Size (in AMPs): *Circle One:* 200 400 600 800

Potable Water Meter Size *Circle One:* 5/8" 1" 1 1/2" 2"

Sanitary Sewer

Reuse Water Meter Size *Circle One:* 3/4" 1" 1 1/2" 2"

Irrigation Meter Meter Size *Circle One:* 5/8" 1" 1 1/2" 2"

2" Temp Fire Hydrant Meter 2" Temp Construction Meter

I hereby make application to New Smyrna Beach Utilities for utility service and upon approval of this application, agree to abide by all NSBU resolutions, tariffs, policies, procedures, rules and standards, and acknowledge and agree this contract is made subject to the provisions of NSBU's Rates, Charges and Fees and Services Policies, and incorporates such manual as part of this contract as it exists at the time of this contract and may be amended. I also acknowledge and agree that the undersigned shall be liable for all applicable sales tax and agree that I will be personally responsible for the payment of deposit and/or utility bills rendered under this account.

Applicant Signature _____ Deposit (if required) \$ _____ Deposit due date _____