



Seminole County Water & Sewer Owner Application for Automatic Reactivation of Utility Service

Owner Name(s) on Account: _____

Daytime Phone: _____ Cell Phone: _____

Email Address: _____ Driver's Lic. State: _____ Number: _____

Service Address

Street: _____

City: _____ Zip: _____ Subdivision: _____

Mailing Address

Street: _____

City: _____ State: _____ Zip: _____

Submit To: Seminole County Water & Sewer: P.O. Box 958443 Lake Mary, FL 32795-8443
Fax: (407) 665-2125 E-Mail: WSCustomerService@seminolecountyfl.gov

*****Important Information - Please Read*****

Any account set up after 1:00pm that has been disconnected will not be scheduled to have water reconnected until the following business day.

I give Seminole County Water & Sewer department permission to automatically reactivate services in my name after each termination of services made by tenant(s).

I understand it is my responsibility to complete a stop service request form when a tenant moves into the property or if I want to discontinue the reactivation of services.

I understand it is my responsibility to notify Seminole County Water & Sewer Department if I sell the property and to terminate this service request.

A deposit or letter of credit will be required. Deposits will be held on the account until termination of the reactivation of service request. Deposits may be used to pay on unpaid delinquent final account(s).

Letter of credit requirements: Must come from previous utility company (water, electric, or gas). Must cover last 12 months of service, no late payments, no returned checks, no disconnects for non-payment.

There will be a \$30.00 service charge on your first bill to cover maintenance and administrative costs related to opening your account.

- I am applying for utility service from Seminole County Water and Sewer Utility at the above address. I agree to follow and abide by all rules for utility service and to pay charges in effect as stated on each monthly bill.
- I am also responsible for making sure that all faucets are turned off in the home before the service is established. The county is not liable for damages caused by water faucets or outlets left on.
- I understand that non-payment of my account timely when due will result in default of my account and discontinuation of service. I agree to pay the reasonable collection expenses, court costs, and attorney fees of Seminole County for collecting any unpaid balance of my account in the event of such default.

Signature: _____ Date: _____

(Write or Type Name to Acknowledge Above Statement)