

CITY OF MAITLAND

1776 Independence Lane
Maitland, Florida 32751
407- 539-6265 www.itsmymaitland.com

2018 COMMERCIAL UTILITY REQUEST FORM (Please Print)

Service Address _____ Today's Date _____

Business Name _____ Effective Date: _____

Contact Person _____ Business Phone #: _____

Property Owner/Management Co _____ Phone #: _____

Mailing Address _____
(If different from Service Address)

Remodeling? If a roll-off container is needed, please call to request the Approved Roll-off Vender List.

Fees to Begin Utility Services

Water Deposit* \$ _____

Sewer Deposit* \$ _____

Irrigation Deposit* \$ _____

*(Will Vary Based on Meter Size)

Commercial Refuse Deposit \$ _____

(Amount Equal to One Month's Service)

Hydrant Meter \$1,500.00 \$ _____

(Base Fees Will Apply)

Non-Refundable

Cart Activation Fee \$60.00 \$ _____

(Per Cart)

Solid Waste Fee (Will Vary) \$ _____

TOTAL DUE \$ _____

**** Be sure to get your
Maitland Business Tax
Receipt****

Due to privacy laws,
applicants **MUST**
apply in person and
show identification
for themselves or
their company.

Refuse service must be arranged with the City of Maitland using the franchise holder. Service levels to be determined by the City of Maitland (Ref: Maitland Code Sec. 7-24). For more information call 407-539-6265.

I understand and agree that the above named firm is responsible for all charges associated with the above services and will continue to be responsible until such time as a request to terminate the services is received by the City of Maitland's Utility Billing Department.

Signature of Applicant: _____ Date: _____

Office Use Only:

Deposit Amount _____ Customer # _____ Account # _____