

APPLICATION FOR WATER/SEWER SERVICE

CITY OF TYBEE ISLAND
P.O. Box 2749
403 Butler Avenue, Tybee Island, GA 31328-2749
(912) 472-5025, Fax (912) 786-9465
www.cityoftybee.org



_____ Commercial/\$500.00 Deposit _____ Residential/\$200.00 Deposit _____ Own _____ Rent

Date: _____

CUSTOMER NAME: _____

SERVICE ADDRESS: _____

BILLING ADDRESS: _____ CITY _____ ZIP _____

PHONE NUMBER: _____ SECONDARY: _____

Drivers License Number: _____ State: _____

New Construction: _____ Transfer of Service: _____ Date: _____

Paperless Billing Option-provide email address: _____

Enroll in ACH payment option: yes _____

I hereby apply for service at the address shown above. I have read and agree to adhere to the ordinances governing such service. I further agree to financial responsibility for charges billed to this account.

Signed: _____ Date: _____

Account Number: _____ Meter ID: _____

Below for Landlord/Tenant only:

**Owner signature required to process rental application. Owner is ultimately responsible for any outstanding bills that may occur.

Owner Name: _____ Signature: _____

Phone Number: _____

Tenant Name: _____ Signature: _____