

City of Flowery Branch ♦ 5410 W. Pine Street ♦ Flowery Branch, GA 30542 ♦(470) 798-0516 ♦ Fax (770) 967-6481

NEW APPLICATION FOR COMMERICAL WATER & SEWER SERVICE

PLEASE PRINT

BUSINESS NAME:	INCORP DATE:
MAILING ADDRESS:	
WORK PHONE#:	FAX #:
TAX ID#:	
BILLING CONTACT NAME:	BILLING CONTACT #:
EMAIL ADDRESS:	EMAIL BILLS: YES ONO
SERVICE ADDRESS:	
DATE SERVICE TO BEGIN:	
OWNER'S CONTACT NAME:	
OWNER'S ADDRESS:	
OWNERS DRIVERS LIC #:	
OWNER'S PHONE #:	
SIGNATURE:	DATE:
	CE REQUIRES THAT YOU PAY A \$120.00 DEPOSIT AND ICE IS TO BEGIN. THE DEPOSIT AMOUNT OF \$120.00 IS
TOTAL DUE - \$180.00 - We accept Cash, Mor **(Service fee appl	ney Order, Check or Debit/Credit Cards** ies to Debit or Credit card transactions)
	Oocuments or Rental Lease/Agreement, Picture Identification

Customers are billed monthly for utility services and bills are printed and mailed the last week of each month. The entire bill must be paid in full by the 20th of each month to avoid late fees. Late fees are assessed at the rate of 10% of the amount past due. Any billed amount not paid by the cutoff date printed on the customer bill causes the account to be subject to service disconnection for non-payment. If your account goes into cutoff, the account will be assessed a \$60.00 cutoff fee, a \$30.00 turn on fee, and payment of past and current due balances.

Email: SBENITEZ@FLOWERYBRANCHGA.ORG

ADDITIONAL INFORMATION FOR WATER SEWER INSPECTIONS SERVICES:

1.	1. What is the Company's name?	
2.	What is the Company's physical and mailing address? Physical:	
	Mailing:	
3.	Who should be listed as a contact person for any questions or problems?	
4.	How many employees does the company have (approximately)?	
5.	What type of business is performed? (Manufacturing, dry-cleaning, photo development, etc.)	
6.	What type of discharge to the sewer system (Industrial or Sanitary)	
7.	What date did the business open at this location?	
8.	Telephone Number:	
9.	Fax Number:	