



# CITY OF CLERMONT UTILITY SERVICE REQUEST FORM

Date of Request: \_\_\_\_\_

Date of Service: \_\_\_\_\_

## CUSTOMER INFORMATION

Customer Name \_\_\_\_\_

Telephone \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

Zip \_\_\_\_\_

Service Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

Zip \_\_\_\_\_

Lot # \_\_\_\_\_

Phase \_\_\_\_\_

Subdivision \_\_\_\_\_

## OWNER INFORMATION

Owner Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

Zip \_\_\_\_\_

Forwarding Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

Zip \_\_\_\_\_

Check One:

Commercial

Single Family

Multi-Family and # of Units

***Metering Tampering Fee – A fee of \$350.00 per incident shall be charged to the individual responsible for payment of the utility account.***

## CITY STAFF COMPLETES THE FOLLOWING SECTION

Service Requested: \_\_\_\_\_

Size: \_\_\_\_\_

Water Meter: \_\_\_\_\_

Irrigation Meter: \_\_\_\_\_

Meter Reading: \_\_\_\_\_

Meter Serial #: \_\_\_\_\_

Manuf.: \_\_\_\_\_

Date of Service: \_\_\_\_\_

Comments: