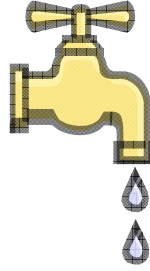
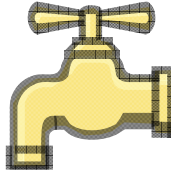




# City of South Daytona

Post Office Box 214960  
South Daytona, FL 32121

## Temp OFF



## Turn ON

DATE OF REQUEST: \_\_\_\_\_

REQUESTOR'S NAME: \_\_\_\_\_

DISCONNECT DATE: \_\_\_\_\_ OR TURN ON DATE: \_\_\_\_\_

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ACCOUNT # \_\_\_\_\_

NAME ON ACCOUNT: \_\_\_\_\_

SERVICE ADDRESS: \_\_\_\_\_

BILLING ADDRESS: \_\_\_\_\_

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I understand that:

- There will be one (1) last bill for service up to the disconnect date listed above.
- I am to notify the Utility Office in writing when service should be restored (both Faxes and e-mails are acceptable).
- At that time, my account will be billed \$20.00 for "reconnecting" and \$9.00 per month (Stormwater Drainage) for each month that service was inactive.

\*\*Please note - the City does not bill utility services on a "pro-rated" basis.

ACCT SIGNATURE: \_\_\_\_\_ DATE : \_\_\_\_\_

*THE CITY OF SOUTH DAYTONA CANNOT BE RESPONSIBLE FOR ANY VERBAL CHANGES REQUESTED ON AN ACCOUNT WITHOUT AN AUTHORIZED SIGNATURE.*