



FIRELINE METER APPLICATION

4200 Hood Road
Palm Beach Gardens, FL 33410
561-627-2900

PLEASE PRINT OR TYPE:

Billing Account Customer/Business Name:	
Service Address:	
Mailing Address:	
Lot Number:	Subdivision:
Person of Contact:	Phone Number:
Email Address:	
BILL BEGINS WITH METER INSTALLATION	
Meter Size: <input type="checkbox"/> 5/8" <input type="checkbox"/> 1"	
Fireline Size: _____	
PAYMENT METHOD: <input type="checkbox"/> CREDIT CARD <input type="checkbox"/> CHECK <input type="checkbox"/> CASH	
TO BE COMPLETED BY SUA	
\$ _____ METER FEE (Non-Refundable)	
\$ _____ OTHER CHARGES _____	
\$ _____ TOTAL DUE	

The undersigned acknowledges that service is provided subject to strict adherence to Seacoast Utility Authority's Service Code and may be interrupted pursuant to any violation thereof. Undersigned also agrees to receive and pay for water service in accordance with the rates, rules and regulations of the Authority until this service is formally discontinued.

Customer Signature:	Date:
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