



UTILITY SERVICES DEPARTMENT
North Brevard Water & Sewer
 2262 High Dr.
 Mims, FL 32754
 Phone: 321-264-5130
 Email: Mims.Billing@brevardfl.gov

APPLICATION FOR SERVICE

The following information is required for the purpose of opening an account. A **deposit of \$120.00** is required prior to the initiation of service. A **base charge** for North Brevard water and sewer will be billed *every month* regardless of usage and a **\$15.00 set up fee** will be charged to your first bill. Make all checks payable to Brevard Water and Sewer. A photocopy of the applicant's and co-applicant's driver's license is required to be submitted with this application.

Applicant's Name: _____

Co-Applicant's Name: _____

Service Address: _____

Mailing Address, (if different): _____

Primary Phone Number: _____ **Secondary Phone Number:** _____

Email Address: _____ **Date of Initiation of Service:** _____

Alternate Contact: _____ **Alternate Email Address:** _____

Applicant Information: Own* Rent**

** If the applicant is the owner, submit a copy of the HUD-1 settlement statement from the closing, or the owner information needs to be updated on the Brevard County Property Appraiser's website at the time of application.*

*** If this is a rental, you will need to provide a copy of the lease and the following information:*

Property Owner's Name: _____

Property Owner's Address: _____

Property Owner's Phone Number: _____

By signing below, I acknowledge and agree to the following: I hereby certify that all the information provided in this application is true and correct to the best of my knowledge. I understand that I am responsible for the prompt payment of all charges at the above service address. I agree to abide by any and all regulations, policies and procedures for the provision of water and wastewater services as established and may be modified by the Brevard County Board of County Commissioners.

Applicant's Signature and Date

Co-Applicant's Signature and Date