



Columbia County Utility Service
P O Box 969
Lake City, Florida 32056-0969
Phone: (386) 719-7565

Customer Service Hours:
Monday – Friday
From 7:30 A.M. to 4:30 P.M.
Email: utilities@columbiacountyfla.com

COMMERCIAL SERVICE APPLICATION

Business Name: _____

Doing Business As: _____

Service Address: _____

Parcel ID #'s: _____ Parcel Zoned: _____

Mailing Address: _____

Federal ID Number: _____ Business Phone: _____

Business Owner/Principal: _____ Phone Number: _____

Point of Contact: _____ Secondary Phone: _____

Moving/Transfer Disconnect Address: _____ Date: _____

If tenant, the following is REQUIRED:

Property Owner's Name: _____ Property Owner's Phone: _____

Property Owner's Address: _____

Date you would like service to start: _____

Water Meter Sizes requested: _____ Projected Flows (GPD): _____

Irrigation Meter Sizes requested: _____ Projected Flows (GPD): _____

Fire: (Line Size & # hydrants): _____ Sewer Connections size: _____

Project Description: _____

“Important Notice to Customer: please read and sign below”

“I hereby make application to Columbia County Florida for utility service to be supplied at the address herein described, and upon approval of said application agree to abide by all ordinances, provisions, and applicable rules of Columbia County in regard to its service of the Utility system and agree to pay for such services in accordance with rules and regulations in effect at the time of delivery.

”I hereby authorize the employees of Columbia County Utility Services to go onto my premises dir the purpose of installing and maintaining the necessary equipment and materials for providing water and/or sewage services to the address herein described.

Applicant's Signature: _____ Date: _____

