



TOWN OF CAROLINA BEACH

Public Utilities Dept.
1121 NORTH LAKE PARK BLVD.
CAROLINA BEACH, N. C. 28428
(910) 458-8291

WATER SEWER AND/OR REFUSE DEPOSIT APPLICATION

PREVIOUS ADDRESS: _____

SOCIAL SECURITY#: _____ *DATE TO BEGIN SERVICE:* _____

SECTION #1 OWNER INFORMATION TO BE COMPLETED BY BUYER OR RENTER OF PROPERTY

STREET ADDR FOR REQUESTED SERVICE: _____

PROPERTY OWNER'S NAME & MAILING ADDRESS:

_____ **PHONE#:** _____

SPOUSE (OR ADDITIONAL PROP. OWNER) NAME _____

SECTION #2: RENTER INFORMATION TO BE COMPLETED BY RENTER OF THE PROPERTY

STREET ADDRESS FOR REQUESTED SERVICE: _____

LEASING AGENT NAME: _____ **DATE TO BEGIN SERVICE:** _____

DURATION OF LEASE: _____ **PHONE#:** _____

NAME AS IT SHOULD APPEAR ON BILL: _____

SPOUSE'S NAME: _____

MAILING ADDR FOR BILLS: _____

SECTION #3 BUSINESSES ONLY:

IS THIS: SOLE PROPRIETORSHIP ___ PARTNERSHIP ___ CORPORATION _____

NAMES & ADDRESSES OF ALL PARTNERS: _____

PARTNERS' MAILING ADDRESSES: _____
(USE BACK OF PAPER IF NECESSARY)

NAME & ADDRESS OF LOCAL MANAGING AGENT: _____

IF NOT A NORTH CAROLINA CORPORATION, IS THIS CORPORATION AUTHORIZED TO DO BUSINESS IN NORTH CAROLINA? _____

FOR ALL APPLICANTS:

EMPLOYER NAME: _____ **PHONE#** _____

MAILING ADDRESS: _____

LIST 3 FRIENDS OR RELATIVES (DO NOT HAVE TO LIVE IN CAROLINA BEACH)

1. **NAME:** _____ **RELATIONSHIP** _____

MAILING ADDR: _____ **PHONE#** _____

2. **NAME:** _____ **RELATIONSHIP** _____

MAILING ADDR: _____ **PHONE#** _____

3. **NAME:** _____ **RELATIONSHIP** _____

MAILING ADDR: _____ **PHONE#** _____

SIGNATURE

DATE