

TOWN OF CAROLINA BEACH
1121 NORTH LAKE PARK BLVD.
CAROLINA BEACH, NC 28428
Billing Department: (910) 458-2983 or (910) 458-4821
Fax Number: (910) 458-2533
WATER SEWER AND/OR REFUSE DEPOSIT APPLICATION

PREVIOUS OR PERMANENT ADDRESS: _____

SOCIAL SECURITY #: _____ EMAIL ADDRESS (FOR PAPERLESS BILLING) _____

SECTION #1: OWNER/BUYER INFORMATION-MUST PROVIDE COPY OF SETTLEMENT STATEMENT (HUD STATEMENT)

STREET ADDRESS FOR REQUESTED SERVICE: _____ CLOSING DATE: _____

NAME: _____ PHONE NUMBER: _____

MAILING ADDRESS: _____

SECTION #2: RENTER INFORMATION-MUST PROVIDE COPY OF SIGNED LEASE

STREET ADDRESS FOR REQUESTED SERVICE: _____ DATE LEASE BEGINS: _____

NAME: _____ PHONE NUMBER: _____

MAILING ADDRESS: _____

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 NC? _____

FOR ALL APPLICANTS:

EMPLOYER NAME: _____ PHONE # _____

MAILING ADDRESS: _____

LIST 3 FRIENDS OR RELATIVES FOR CONTACT IN CASE OF EMERGENCIES OR PROBLEMS

- NAME: _____ PHONE NUMBER: _____
- NAME: _____ PHONE NUMBER: _____
- NAME: _____ PHONE NUMBER: _____

SIGNATURE

DATE

Application is not complete without Social Security Number and Contact Numbers