



Commercial Service Application

TOWN OF CAROLINA BEACH
1121 N. Lake Park Boulevard
Carolina Beach, North Carolina 28428
Phone: (910) 458-2983 or (910) 458-4821
Fax: (910) 458-2997
Email: info@carolinabeach.org

Application will need to accompany the first and signature page of the lease for tenants or the signed HUD statement for owner after closing along with picture ID. We will perform a utility credit check to determine the amount of the security deposit required. Deposits will be refunded 30 days after account is closed only on balances greater than \$5.00. All new accounts will have a nonrefundable \$55.00 set up fee.

Check one: Owner _____ Tenant _____ **Service Start Date:** _____

| | |
|---|--|
| Service Address: _____ | |
| City: _____ | State: _____ Zip Code: _____ |
| Mailing Address if Different than Service: _____ | |
| City: _____ | State: _____ Zip Code: _____ |
| Property Managers Name: _____ | Phone Number: _____ |
| <hr/> | |
| Name of Business: _____ | Tax Identification #: _____ |
| DBA: _____ | |
| Contact Name: _____ | |
| Social Security #: _____ | Driver's License #: _____ State: _____ |
| Contact Phone: _____ | Work Phone: _____ |
| Email: _____ | Email Bill: Yes _____ No _____ |
| Secondary Name: _____ | Position: _____ |
| Contact Phone: _____ | Work Phone: _____ |
| Email: _____ | |
| Previous Address Needed for Utility Check: _____ | |
| City: _____ | State: _____ Zip Code: _____ |
| <hr/> | |
| Signature: _____ | Date: _____ |
| Signature: _____ | Date: _____ |

For Office Information Only

New Account Number: _____

Credit %: _____ Deposit: _____ + \$55.00 Set Up Fee = _____