

City of Tybee Island  
P.O. Box 2749  
403 Butler Avenue, Tybee Island, GA 31328-2749  
(912) 786-4573, Fax (912) 786-5832  
www.cityoftybee.org



**APPLICATION FOR WATER/SEWER SERVICE**

\_\_\_ Commercial (\$500.00 Deposit) \_\_\_ Residential (\$200.00 Deposit) \_\_\_ Own \_\_\_ Rent\*\*

Date: \_\_\_\_\_

CUSTOMER NAME: \_\_\_\_\_

SERVICE ADDRESS: \_\_\_\_\_

BILLING ADDRESS: \_\_\_\_\_

TELEPHONE: Residence \_\_\_\_\_ Cell or Work \_\_\_\_\_

Drivers License Number: \_\_\_\_\_

Nearest Relative (not living with you) \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_ Telephone: \_\_\_\_\_

New Service \_\_\_ Transfer of Service \_\_\_

Transfer From? \_\_\_\_\_

Date to begin service: \_\_\_\_\_

I hereby apply for service at the address shown above. I have read and agree to adhere to the ordinances governing such service. I further agree to financial responsibility for charges billed to this account.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Authorized City Agent: \_\_\_\_\_

Account Number: \_\_\_\_\_ Meter I.D. \_\_\_\_\_

Receipt #: \_\_\_\_\_ Read: \_\_\_\_\_

\*\*Owner signature required to process rental application. Owner is ultimately responsible for any outstanding bills that may occur.

Owner name: \_\_\_\_\_ Signature: \_\_\_\_\_

Tenant Name: \_\_\_\_\_ Signature: \_\_\_\_\_