



Port of the Islands Water & Sewer

Application for Utility Service

Name(s) on Account: _____

Daytime Phone: _____ Cell Phone _____

Email Address: _____

Driver's License: State: _____ Number _____

Date Service to Begin: _____ Deposit Amount: (150.00 renter required) _____

Which will you be doing: (Deposits cannot be made online)

____ Making a Deposit (Payable to: Port of the Islands)

Please select services requested: ____ Water ____ Sewer ____ Irrigation

Service Address- Street _____

City _____ State _____ Zip _____

Mailing Address- Street _____

City _____ State _____ Zip _____

Submit to by Mail or Fax: Port of the Islands

Premier District Management, 3820 Colonial Blvd, Suite 101, Fort Myers, FL 33966 (Fax 239-214-6074)

*****Important Information***- Please read**

Any account set up after 1:00 PM that has been disconnected will not be scheduled to have water reconnected until the following business day.

There will be a \$10.00 connection fee.

- I am applying for utility service from Port of the Islands Water and Sewer Utility at the above address. I agree to follow and abide by all rules for utility service and to pay charges in effect as stated on each bi-monthly bill.
- I am also responsible for making sure that all faucets are turned off in the home before the service is established. The District is not liable for damages caused by water faucets or outlets left on.
- I understand that non-payment of my account will result in discontinuation of service.

• Signature: _____ Date: _____

(Write or type name to acknowledge above statement)