



Atlantic City Municipal Utilities Authority

APPLICATION FOR SERVICE AGREEMENT (Commercial)

NAME AND ADDRESS
OF APPLICANT: _____
(Must be owner or _____
developer of property) _____

A CORPORATION IN THE
STATE _____

NAME AND ADDRESS
OF OWNER: _____
(If other _____
than applicant) _____

LOT AND BLOCK OF
PROPERTIES TO BE
DEVELOPED: LOT# _____ BLOCK _____

DESCRIPTIVE LOCATION
OF PROPERTIES TO BE
DEVELOPED: _____

REQUIRED DAILY WATER
SUPPLY OF THE PROPERTY: _____
(The figure listed must be
supported by back-up
documentation to be
attached to this application)

OFF-SITE IMPROVEMENTS
TO BE REQUIRED BY THIS
(This portion of the
application may be
filled out by Authority
PERSONNEL) _____

DATE: _____ NAME: _____

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