TOWN of MICANOPY
Water Utility Department
PO BOX 137, MICANOPY, FL 32667-0137

(352) 466-3121 office (352) 466-4912 fax
email: townhall@micanopytown.com www.micanopytown.com
Office Hours: Monday – Thursday 7:30 am – 6:00 pm

Account:	
Seq. Route:	
Meter:	
Reading:	

Office Hours: Monday – Thursday 7:30) am — 6:00 pm
Water Utility I ***Attach a Copy of App	Department Service Contract olicant's Driver License or State Photo ID***
Account Name	
TelephoneTax Parcel #	
Mailing Address	
Email	
New Construction Existing Servi	ce Residential Business
Service Rates as of August 1, 2019 Water Rates: Base Rate = \$20.07 + \$2.19 from 0 – 1,000 gall The cost of each additional 1,000 gallons (or pa (or part thereof) as flat rate for usage over 10,000	lons used = \$22.26 minimum rate per month. art thereof) is scaled from \$2.46 to a maximum of \$6.56 per 1,000 00 gallons (see rate schedule for 1,000 gallon rate increments.)
Residential Garbage Rates per month: Once-weekly pick-up Curbside = \$19.19	Commercial Garbage Rates per month: Once-weekly pick-up Curbside = \$32.00 2-yard Container = \$79.59 4-yard Container = \$159.17 6-yard Container = \$238.76 8-yard Container = \$318.34
Water Deposit: \$75.00 (refundable less any ou Furn-on/Account set-up Fee: \$25.00 New Water Meter Installation: \$750.00	itstanding charges when account is closed)
Bills are mailed monthly after meters are read an 21st of the month following the billing date, a 10%	nd payment is due upon receipt. If payment is not received by the % service charge will be added to the account.
naintained at all times. Meters should not be fe	opy Water Utility Department. Full access to the meter must be need, locked, tampered with, or turned on/off at any time, and the g(s) are within the proximity of the meter, the meter may not be
and Resolution 2019-12 Town Fees providing f	ordinance 2016-09), Chapter 35, Article III Micanopy Water Utility, for discontinuance of service due to non payment and specifying diregulations may be obtained from Town Hall upon request.
We hereby request water and garbage service ead and understand this contract and the require	from the Town of Micanopy Water Utility Department. I/We have ements of the Water Utility Department.
Applicant(s) Signature	
Application Date	Turn-on Date
Amount Paid	Date paid
Vater Clerk Signature	Date