



**TOWN OF SNEADS**  
 2028 Third Avenue  
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 Sneads, Florida 32460  
 PH (850)593-6636 Fax (850)593-5079  
[www.sneadsfl.com](http://www.sneadsfl.com)  
 Facebook: Town of Sneads- City Hall

## Transfer of Utility Services

Name and Address  
 (PLEASE PRINT)

\*\*\* Proof of Ownership of property of lease agreement must be attached.

Applicants Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Driver's License State \_\_\_\_\_ Number \_\_\_\_\_ Soc. Sec. Number \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone # \_\_\_\_\_ Secondary Phone # \_\_\_\_\_

Email Address \_\_\_\_\_ Work Phone # \_\_\_\_\_

OLD ADDRESS : \_\_\_\_\_

OLD ACCOUNT #: \_\_\_\_\_

TURN OFF DATE : \_\_\_\_\_

NEW ADDRESS : \_\_\_\_\_

TURN ON DATE : \_\_\_\_\_

SIGNATURE : \_\_\_\_\_ DATE : \_\_\_\_\_

**If not signed at City Hall, this form must be notarized**

State of \_\_\_\_\_ County of \_\_\_\_\_

The foregoing instrument was acknowledged before me by means of \_\_\_ physical presence or \_\_\_ online notarization, this \_\_\_ day of \_\_\_\_\_ 20\_\_\_, by \_\_\_\_\_, who is personally known to me or who has produced proper identification.

\_\_\_ Personally Known OR \_\_\_ Identification Produced: \_\_\_\_\_

\_\_\_\_\_

Notary Signature

\_\_\_\_\_

Notary Name

Notary Stamp Below: