



Clay County Utility Authority
 3176 Old Jennings Road
 Middleburg, Florida 32068-3907
 Telephone (904) 213-2466

*Working together to
 protect public health,
 conserve our natural
 resource, and create
 long-term value for our
 ratepayers.*

Request for New Service Turn On – Commercial

This form must be submitted in its **entirety** and at least 24 hours prior to when you would like the service connected to your commercial account. New Services are turned on Monday thru Friday during normal business hours.

Account Information:

Name of Business (MUST match EIN)	D/B/A, if applicable
EIN/Federal ID Number	Type of Business/ NAICS Code

New Service Address to Connect:

Street Address	Unit # (if applicable)
City, Zip	Preferred Connection Date

Contact Information:

Last	First
Mailing Address	Unit # (if applicable)
City, State, Zip	E-mail Address
Phone Number	Phone Number
1.	2.

DISCLAIMER: When submitting this request for new service you are acknowledging that it is your responsibility to be certain that the internal plumbing has been secured and all faucets are in the **OFF** position prior to your initiation of service.

IMPORTANT: Additional Information may be required based off your business type. If you are submitting electronically, send application as one PDF attachment. **NO** pictures, only scanned documents will be accepted.



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Transferring Service

Does **your business** currently have service with the Authority that you are wanting to disconnect and transfer? (Circle)

Yes	No
-----	----

If yes, fill out below.

Street Address, Unit # (if applicable)	Customer Number
Preferred Disconnection Date	CCUA allows services to overlap for a maximum of 30 Days on security deposit transfers.

New User Survey

Circle yes or no to the following.

Yes	No
-----	----

Is there a private well on the property?

Yes	No
-----	----

Are toxic chemicals used in the production of your goods/service you provide?

Yes	No
-----	----

Is there a sprinkler system with chemical injectors?

Yes	No
-----	----

Will this business discharge any wastewater other than from restrooms to CCUA? If yes, provide Material Safety Data Sheet

Yes	No
-----	----

Has this facility's wastewater ever been analyzed? If yes, provide a copy.

If one or more of the above apply, you must schedule an inspection before service is available.



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Backflow Acknowledgement

I understand that the CUA cross-connection control policy requires the potable water service at all commercial accounts be equipped with a reduced pressure backflow assembly. And that the RP assembly must immediately be downstream of the water meter serving the location. Furthermore, I agree to continue having this device tested annually per the last test date and/or scheduling an inspection upon start of service. I also understand that if a RP is not operating properly or in non-compliance of the policy, the potable water service at this address is subject to termination and additional fees. **Policy will be provided upon request.**

Next Test Date (Please request if you are unaware)

Signature _____ Date _____

Fats, Oils, and Grease Best Management Practices (FOG BMP) Acknowledgment

I understand that all nonresidential users that prepare, process, or serve food or food products and discharge to the Publicly Owned Treatment Works (POTW) sewer system shall have an approved grease interceptor/trap. Furthermore, any facility that prepares and/or serves food or beverages for sale or consumption is required to participate in the CUA FOG BMP program. I also understand that by not adhering to this policy, the potable water service at this address is subject to termination and additional fees. **Policy can be found at www.clayutility.org under My service → Fats, Oils, and Grease Policy.**

Grease Interceptor Size	Grease Waste Removal Company

Signature _____ Date _____

Change(s) Acknowledgement

I am aware that I must report to the Utility (15) days prior of any changes pertaining to my business and/or seat count after this application was submitted.

Signature _____ Date _____



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Fixture Unit Count

Bathroom Fixtures	Quantity
Bathroom	
Toilet	
Urinal	
Hand Sink	
Shower	
Floor Drain	

Other Fixtures	Quantity
Utility Sink	
Mop Sink	
Wash Sink	
Bar Sink	
Hand Sink	
Kitchen Sink	
3 Compartment Sink	
2 Compartment Sink	
Interior Hose Bib	
Drinking Fountain	
Floor Drain	
Hub Drain at Grade	
Trench Drain	

Auto Repair/Maintenance	Quantity
Bays	
Interior Hose Bib	
Oil Trap	
Sand Trap	

Hair Salon & Spa	Quantity
Styling Chair	
Shampoo Bowl	
Pedicure Chair	
Washing Machine	

Pet Grooming	Quantity
Wash Tub	
Hair Trap	
Washing Machine	

Cleaners/Laundry	Quantity
Top Load Washer	
Front Load Washer	
Lint Trap	

Doctor/Dentist Office	Quantity
Doctor	
Dentist	
Exam Chair	

Day Care, School, Church	Quantity
Student	
Sanctuary Seat	
Grease Trap	

Food or Drink Service	Quantity
Dishwasher	
Grease Trap	

Seat Count	
Tables x Seats	
Booths x Seats	
Outdoor x Seats	
Bar x Seats	

Submit copy of Menu & Floor Plans