

CITY OF VERO BEACH UTILITIES
SERVICE DISCONNECT REQUEST
Tear Down Application
(Service Disconnect for Demolition)

Information Sheet

REQUESTOR'S NAME: _____

CONTACT PERSON: _____ TEL. NO.: _____

E-MAIL ADDRESS: _____ CELL NO.: _____

HOMEOWNER'S/TENANT'S NAME: _____

SERVICE ADDRESS: (Street) _____

(City) _____ (State) _____ (Zip) _____

TELEPHONE NO: _____

DISCONNECT INFORMATION

DEMOLITION SCHEDULE DATE: _____

SERVICES: (Please select services for location)

Water Irrigation Re-use

Will water be required for the demolition or re-build? YES – Need App & Date : _____

(If yes, a new service application must be processed.) NO

**The Water & Sewer Department will make the final determination of a water meter staying in the field.
They may pull any water meter that is determined to be in harm's way during the demolition.

Job Description: _____

Customer Signature: _____ Date: _____

Mail to:
City of Vero Beach
P.O. Box 1389
Vero Beach, FL 32961-1389

email to :
custsvc@covb.org

Fax to :
(772) 978-5125