



Mailing: 25440 W Newberry Rd
Newberry, Florida 32669
Tel: 352-472-2161 Ext. 3
www.NewberryFL.gov

STAFF USE ONLY

SERVICE RECONNECT APPLICATION

Permit Number: _____

OWNER INFORMATION

Name: _____

Phone: _____

Address: _____

Email: _____

Owner/Builder Contractor (if contractor complete section below)

CONTRACTOR INFORMATION

Company: _____

Phone: _____

Address: _____

Email: _____

License Holder: _____

License Number: _____

License Expiration: _____

Liability Ins. Number: _____

Liability Expiration: _____

Worker's Comp. Number: _____

Worker's Comp. Expiration: _____

PROPERTY INFORMATION

Property Address: _____

Parcel ID: _____

Zone: _____

Use: _____

Subdivision: _____

Lot: _____

Block: _____

Septic Permit: _____

PROJECT SUMMARY

Disconnect Date: _____

Beds: _____

Baths: _____

Conditioned SQFT: _____

Total SQFT: _____

ADDITIONAL NOTES

SIGNATURE OF OWNER OR CONTRACTOR

DATE

Located in the Historic Little Red School House
25815 S.W. 2nd Avenue