

<u>DEPOSIT FORM</u> <u>UTILITY BOARD OF THE CITY OF KEY WEST, FLORIDA</u>

DEPOSIT AGREEMEN	T		
Account No.	Deposit Amount \$		
Service in the Name of			
Service Address			
Credit Card Number Credit Card Security Code:	* Credit card payments will be a	Expiration Date/	
agreement to secure payment a in the ordinary course of busine services rendered have been pa the remaining balance, if any, b	nd performance of all the debts and obligations arising ess. The Utility Board will keep possession of the dep	security interest in the service deposit provided for under this g from the provision of the Utility Board services to the customer posit and will refund the deposit only after all bills charged for the applied to any outstanding bills owed by the customer with	
I understand that by checking	the box next to the words "I Accept" below and typir	ng my name, I am signing this document electronically.	
I Accept			
	Customer Signature	KEYS Representative	
TRANSFER OF DEPOS	SIT		
	Deposit Amount \$	Receipt No	
Service in the Name of			
Service Address			
I hereby request to transfer my	service deposit with the Utility Board to		
I understand that by checking	the box next to the words "I Accept" below and typin	g my name, I am signing this document electronically.	
I Accept			
1 Ассері	Customer Signature	Date	
ACCEPTANCE OF DEA	POSIT		
Ι	as the new customer of record for Deposit No		
in the amount of \$	agree to pay the final billing on Account No		
I further understand that the fir	nal balance owed on this account will be transferred to	my new account as soon as it is known.	
New Account No	Service Address		
I understand that by checking t	the box next to the words "I Accept" below and typin	g my name, I am signing this document electronically.	
I Accept			
	Customer Signature	Date	